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REGULATIONS

FOR THE

DICAL DEPARTMENT

OF

ER MAJESTY'S ARMY

1878.

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MEDICAL DEPARTMENT

OF

HER MAJESTY'S ARMY.

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I.—Director General.
II.—Administrative Officers.
III.—Executive Officers.
IV.—The Army Hospital Corps.

I.—DIRECTOR GENERAL.

1. The Director-General of the Army Medical Department is the responsible Head of that Department. Director General.

2. He will be assisted by three Administrative Officers, who will conduct Administrative Medical Officers at head-quarters.

(*a.*) The Medical Branch.
(*b.*) The Sanitary Branch.
(*c.*) The Statistical Branch.

3. These officers will preside at Medical Boards at the office of the Army Medical Department; and will make inspections of hospitals, barracks, camps, &c., when deemed necessary by the Director-General. Their duties.

II.—ADMINISTRATIVE OFFICERS.

4. The Administrative officers of the Army Medical Department will be of the rank— Administrative Officers of the Department.

(*a.*) of Surgeon General.
(*b,*) of Deputy Surgeon General.

III.—EXECUTIVE OFFICERS.

Executive Officers.

5. The executive officers will be of the rank—

(*a.*) of Surgeon Major.
(*b.*) of Surgeon.

IV.—THE ARMY HOSPITAL CORPS.

Officers of Army Hospital Corp.

6. The officers of the Army Hospital Corps are of the rank—

(*a.*) of Captain of Orderlies.
(*b.*) of Lieutenant of Orderlies.

SECTION II.—DISTRIBUTION OF THE DEPARTMENT.

7. The officers of the Army Medical Department will, subject to the supreme command of the officer Commanding-in-Chief, be detailed for duty by the Director General of the Army Medical Department, in commands and districts, and will be under the control of the Principal Medical Officer, both for discipline and professional supervision. Medical Officers detailed for duty by Director General.

8. They will not be removed from commands or districts without the previous sanction of the Director General, except under exceptional circumstances. Removal of Officers by Director General.

9. They will be employed in general, station, or field hospitals, with troops in barracks or in the field; and on all such special duties in camp and quarters as the Director General may decide, and as are laid down in Part II, Section VI, Field Hospitals and Hospital Ships. How to be employed.

10. The Director General of the Army Medical Department, will nominate medical officers for the following appointments:— Appointments by Director General.

(*a.*) Principal Medical Officer.
(*b.*) The Charge of General, Station, and Field Hospitals.
(*c.*) The Command of Bearer Companies.
(*d.*) The Charge of Female Hospitals, including charge of General Staff, officers, and their families; also the wives and children of soldiers.
(*e.*) Sanitary Officer.
(*f.*) Examiner of Recruits.

11. Principal Medical Officers will nominate to all other duties, forwarding a detail of all appointments to the Director General of the Army Medical Department, except in cases where the Director General nominates the whole staff himself for a General or Station Hospital. Nominations by Principal Medical Officers.

12. Where a Special Sanitary Medical Officer is not appointed, the Principal Medical Officer, or the Senior Medical Officer present, will act as such, and in all other cases medical officers will follow the instructions contained in paragraph 40 of these Regulations. Sanitary Officer.

13. Medical officers detached from their commands or districts, on special duty, will return thereto on the completion of the special duty. Medical Officers detached.

14. When a regiment moves from one district to another, a Medical Officer will accompany it, and on completion of the duty will return to his own district. Movements of regiments.

SECTION III.—GENERAL DUTIES.

I.—Duties of Surgeon General and Deputy Surgeon General.
II.—Duties of Medical Officers doing duty with Troops.
III.—Duties of Medical Officers in charge of Troops on board ship.

I.—DUTIES OF SURGEON GENERAL AND DEPUTY SURGEON GENERAL.

Duties of Surgeons General and Deputy Surgeons General.

15. Surgeons General and Deputy Surgeons General will under General Officers Commanding, have command of the Medical Officers, Officers, Non-commissioned Officers and Privates of the Army Hospital Corps serving in their districts, they will have medical supervision and superintendence of districts at home and abroad; of General Hospitals; and of Hospital establishments during mobilization, manœuvres, and with armies in the field.

Responsibility for medical arrangements.

16. They will be responsible for all Medical arrangements and sanitary duties, and for the administration of all Hospitals within their districts, or connected with any Force in the field, to which they may be appointed.

for distribution of Officers, &c.

17. They will be responsible for the distribution and employment of all Medical Officers serving under them, and for the distribution and employment, under instructions from the Director General of the Army Medical Department, of all Officers. Non-commissioned Officers, and Privates of the Army Hospital Corps allotted to their districts.

Inspection of stations and camps.

18. They will make inspections of all stations and camps where Troops are quartered, throughout their districts, once a year on foreign stations; and twice a year at home, or at such other times as the Director General may appoint.

Inspection of Army Hospital Corps.

19. On these occasions they will make a minute inspection of each detachment of the Army Hospital Corps.

Inspection of barracks.

20. They will inspect Barracks and all buildings occupied by Troops, and all subsidiary buildings attached thereto, and garrison and other cells in their districts, to ascertain if they are in good sanitary condition, and if everything necessary for the health of the troops is supplied.

21. They will ascertain—

(*a.*) That the conservancy arrangements are satisfactory and carefully attended to;

DUTIES OF SURGEON GENERAL—continued.

(*b.*) That the means of ablution and cleanliness are sufficient, and are made use of by the men;

(*c.*) That the water supply is good and abundant and perfectly protected from pollution;

(*d.*) That the rations have been good, and that the means of cooking are sufficient and satisfactory;

(*e.*) That the duties and employments of the troops are such as are not likely to prove injurious to health; and

(*f.*) That recreation rooms, games, and gymnastic exercises are provided and attended by the men, without risk to health.

Recommendations to Commanding Officers and Medical Officers.

22. They will make any recommendation, either verbally or in writing, to Commanding Officers of Corps, or Medical Officers doing duty therewith that may be considered necessary for preserving the health of the troops or for the mitigation or prevention of disease.

Frequent visits to hospitals.

23. They will make frequent visits to Hospitals in their immediate vicinity; and a thorough inspection of all Hospital establishments in their districts twice a year at home, and once a year on foreign stations, so as to ascertain that they are in a good sanitary condition, conducted in conformity with existing regulations, and that everything necessary for the care and treatment of the sick is supplied.

To ascertain that hospital arrangements are satisfactory.

24. They will ascertain that the Hospital accommodation is sufficient for the requirements of the station, that the vicinity of the Hospitals and enclosures are in a good sanitary condition, that the buildings and out-offices are in good repair, and that the conservancy arrangements are satisfactory and carefully attended to.

Water supply, &c.

25. They will also ascertain that the water supply is pure and abundant, and sufficient for all the requirements of a Hospital, that due attention is paid to the cleanliness, ventilation, warming, and lighting of the wards, and that the lavatories, bathrooms, and waterclosets are kept in proper order.

Diets and extras.

26. They will see that all articles of diet and extras are of good quality, that the supplies are procured without difficulty or delay, and that the necessary returns and vouchers connected with their expenditure are accurately kept, also that the kitchen arrangements are good and sufficient, and that the preparation and distribution of diet and extras are conducted according to regulation.

Equipment of Medical and Surgical stores.

27. They will ascertain that the equipment of every kind is supplied according to regulation and kept in a serviceable condition. They will take care that the medical stores and surgical instruments are according to the authorised scale and in good condition, that the supplies of medicines and appliances are sufficient, that they are properly cared for, used with the necessary ecomomy, and that drugs of a poisonous character are in safe keeping.

Section III. General Duties.

DUTIES OF SURGEON GENERAL, &c.—continued.

Army Hospital Corps.

28. They will satisfy themselves that the Non-commissioned Officers of the Army Hospital Corps are competent and trustworthy, that the men are thoroughly efficient, and that each Non-commissioned Officer and Orderly is in possession of a copy of the Regulations for the Corps, also that due order, quietness, and discipline are maintained in the Hospital.

Hospital records.

29. They will examine the medical, statistical, sanitary, and all other records to see that they are properly kept, and will ascertain that all cases of interest, and all in which extras have been given, have been recorded.

Books to be in possession of Medical Officers.

30. They will ascertain that each Medical Officer has a copy of the Queen's Regulations and Orders for the Army, 1873. (Revised Army Regulations, Vol. II), Army Medical Regulations (Revised Army Regulations, Vol. VI), Standing Orders of the Department, Manual of Instruction for Army Hospital Corps, Ophthalmic Manual, and Nomenclature of Disease, and whether the following books are on charge as part of the Hospital equipment, viz., the British Pharmacopœia, Snellen's Test Types, and the Test Dot Cards, Army Medical Reports commencing at 1874, Hospital Ready Reckoner, and Priced Vocabulary of Stores.

Medicines and Instruments.

31. They will examine the medicines and instruments in charge of medical officers doing duty with Corps.

Requisitions for W.O. Forms.

32. They will make periodical requisitions on W. O. Form 165 on the War Office, for all supplies of W. O. Forms and books necessary for every medical requirement in the district or command under their superintendence, also for all stationery necessary for station and female hospitals. They will issue these supplies, and check the expenditure thereof.

Mortuaries.

33. They will ascertain that the mortuary is well ventilated, clean, supplied with the necessary fittings and appliances, and that there are suitable arrangements for the burial of the dead.

Mortality and disease.

34. They will ascertain if there has been any excessive amount of disease or mortality among the troops, and if any epidemic, infectious, or contagious form of disease has appeared in the station or broken out in Hospital, and what measures were taken for prevention and mitigation.

Instructions to Medical Officers.

35. They will issue to Medical Officers, either verbally or in writing, any instructions that may be deemed necessary, either in connection with Hospital administration or for the welfare of the sick.

Report on W.O. Form, 824.

36. Administrative Medical Officers, when they have completed their inspections of barracks and Hospitals, will report the result immediately to the Director General of the Army Medical Department on W. O. Form 824. No other documents will accompany this report.

Sanitary recommendations.

37. They will also submit all sanitary or other suggestions and recommendations in writing to the General Officer commanding the district, and forward copies to the Director General with their next quarterly sanitary report, W. O. Form 463.

DUTIES OF SURGEON GENERAL, &c.—continued.

38. They will give their opinion on all matters referred to them by the local Military authorities, and only in case of positive difficulty or doubt will they refer such local matters to the Director General. Opinion or references.

39. In submitting any question for the opinion or decision of the Director General, they will invariably forward their own opinion thereon, with the rest of the correspondence. Submission of opinion for decision of Director General.

II.—DUTIES OF MEDICAL OFFICERS DOING DUTY WITH TROOPS.

40. A Medical Officer, doing duty with troops, both in camp and quarters, will report any insanitary condition that may exist in the vicinity of his charge to the Sanitary Officer, or in his absence to the Medical Officer in charge of the Station Hospital; and will be guided in the performance of this and his other duties by existing regulations and by such instructions as he may receive from the Principal Medical Officer of the District. Sanitary Reports.

41. He will, in addition to the above, be available for duty in the Station Hospital, or for any professional or departmental duty for which he may be detailed by the Principal Medical Officer. Duty at station hospital.

42. He will, in accordance with sec. 14, par. 17, of the Queen's Regulations and orders for the Army, 1873, attend parades of the troops when inspected by a General Officer, and any other parades when professional assistance is wanted; under ordinary circumstances the attendance of a Medical Officer at rifle ranges, and at target practice, will not be required; but the name and address of a Medical Officer, who could be sent for if necessary, will be communicated to each officer in charge of parties at practice. The Medical Officer warned for this service will remain either in the hospital or in quarters. Attendance at parades.

43. At certain stations, where considered necessary by the Principal Medical Officer, a medical inspection room, with the necessary furniture, will be provided in the Barracks, in which men reported sick will be seen, and where the instruments and necessary medicines will be kept. At Stations where there is only one regiment, or where the Hospital is within the Barrack enclosure, an inspection room will not be provided in the Barracks. Medical inspection room.

44. In accordance with sec. 14, para. 15, Queen's Regulations and orders for the Army, 1873, the Medical Officer will examine all Non-commissioned Officers and soldiers reported sick where there is an inspection room in Barracks, and those whom he may consider unfit for duty will be sent to Hospital. The regimental number, name, and all particulars of each man will be entered on a sick report (furnished in duplicate), as laid down in General Order 14 of 1874, and General Order 20 of 1876; both copies of which will be sent with the men to the Medical Officer in Examination of sick. Sick report.

charge of the Station Hospital. The disease, and any remarks, will be entered in pencil only.

Sick to arrive before morning visit.

45. The sick will leave the barracks at such hours as may enable them to reach the Station Hospital before the morning visit.

Slight cases.

46. Men requiring only trivial dressings or medicine will be dealt with at the inspection room, and the words "medicine; duty" will be written opposite each man's name.

Sick report.

47. In filling up the sick report great care will be taken that all particulars are correctly stated.

Soldiers reported sick unnecessarily.

48. When a soldier is reported sick unnecessarily, the word "*duty*" will be written opposite his name in the column of remarks in the sick report which is sent to the Commanding Officer.

Convalescents.

49. Soldiers will not be detained in Barracks as convalescents, or as such be excused from duty. Should it be necessary, however, that any men be temporarily excused from drill, musketry practice, or general duty after vaccination, the Medical Officer will include the names of such men on the sick report sent to the Officer Commanding recommending the light duty which he considers appropriate in each case.

Sick may be detained one day in Barracks.

50. Soldiers reported sick who may require rest for a day only will be detained in Barracks for that day and employed on such light duty as the Medical Officer may recommend, but if reported sick on the following day they will be sent to Hospital, examined by the Medical Officer in charge thereof, and admitted to Hospital if necessary,

Attendance on Officers and their families, and on soldiers' wives and children.

51. When no Medical Officer is especially appointed, the Medical Officer doing duty with troops will attend the Officers of the Station, also their wives and such of their children and servants, as may be entitled to Medical aid; also all women and children belonging or attached to the troops under his charge who are entitled to Medical attendance: those of the women and children who are unable to attend at the inspection room or hospital will be visited at their own quarters.

Medicines for officers, &c.

52. The necessary medicines and appliances for Officers and their families, also for soldier's wives and children, will be procured from the surgery at the Station Hospital.

State of sick, W.O. Form 986.

53. At such Stations where there is only one Medical Officer in charge of both troops and Hospital, the daily state of sick on W. O. Form 986 will be sent to the Officer Commanding; but at large stations or when the Medical Officer doing duty with troops has not charge of the Station Hospital the sick reports specified in paragraphs 44 and 47 only will be furnished to Officers Commanding Corps.

Instruments, &c.

54. The Medical Officer will be responsible for the charge of:—

One field companion.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

One stomach pump.
One set of tooth instruments.
One set of field splints.

55. He will obtain from the Station Hospital, on requisition, W. O. 884, any further supplies of medicines which the Principal Medical Officer may consider necessary, also such articles as may be required from time to time to keep the field companion complete. All these articles will be kept under lock and key in the inspection room. Requisition for medicines.

56. He will inspect the prisoners at the inspection room before they appear at the orderly room, and also inspect all prisoners to be tried by court-martial, as well as those committed to provost or military prisons, and will furnish the necessa certificates. Examination of prisoners.

57. He will inspect the regimental cells daily, and see each prisoner confined therein. Inspection of cells.

58. He will make the usual weekly health inspection of the troops. Health inspections.

59. He will apply to the Officer Commanding for a permanent orderly to keep the inspection room in order, and to act as messenger and orderly for all medical purposes. Orderly for examination room.

60. He will apply to the Principal Medical Officer for whatever stationery may be required; also for any W. O. Forms that may be necessary. Stationery.

61. He will only receive orders from the Senior Medical Officer present. Senior Medical Officer.

III.—DUTIES OF MEDICAL OFFICERS IN CHARGE OF TROOPS ON BOARD SHIP.

62. When troops are ordered on foreign service, and have been detailed by the Commanding Officer, they will be at once examined by a medical officer. They will, subsequently, be inspected by the Principal Medical Officer, several days before the date of embarkation, to decide as to their general fitness, so as to give Commanding Officers sufficient time to replace those considered ineligible by the Principal Medical Officer. P.M.O.'s inspection of drafts for foreign service.

63. A Medical officer will, on the day of embarkation, if possible, or if this be impracticable, on the previous day, make a careful examination of every Soldier, Woman, and Child of every Regiment or detachment ordered to embark for foreign service. He will forward to the Principal Medical Officer of the District, for transmission to the Director General of the Army Medical Department, a statement of the number of Men, Women, and Children fit to embark, together with a Certificate that he has made the examination referred to, and and that no case of Infectious Disease exists amongst them. Examination of troops before embarking.

Section III. General Duties.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

In all cases where Troops, Soldiers' Wives, or Children are proceeding from one station to another, the sanitary precautions laid down in Part 5, Sec. VII, of these Regulations will be followed.

Medical comforts on board Her Majesty's ships.

64. The medical comforts required for Troops embarked on board Her Majesty's ships will be obtained by the Paymaster of the ship, and be issued by him on the requisition of the Medical Officer in charge of the Troops. Supplies of medical comforts required from Army Stores for Her Majesty's ships conveying Troops or Military Invalids will be placed in charge of the Paymaster of the ship, who will be accountable to the Admiralty for the quantities remaining unexpended at the conclusion of the voyage.

Regulations for hired ships.

65. In hired ships a copy of the Regulations for Her Majesty's Transport Service will be provided by the Admiralty and kept on board, and access can be had thereto by application to the Master of the vessel.

Medical comforts on board hired ships.

66. All supplies of medical comforts for hired troop ships furnished by the Admiralty according to the Scale laid down in Appendix No. XIX of the Transport Regulations will be placed in the custody of the Master of the vessel, and will be issued by him as required during the voyage on the requisition of the Medical Officer in charge.

Medical comforts on board hired ships.

67. These medical comforts are supplied whether the Troops be victualled by the Government or by the shipowners; but should the Principal Medical Officer at the port of embarkation be of opinion that either from the number of sick about to be embarked, or from the nature of the cases, the regulated supply is insufficient or requires to be supplemented with special articles, such additional medical comforts as he may consider necessary will be obtained by the Naval Authorities at the port, or by the Commissariat Department, and will be placed in charge of the Master for issue on the requisition of the Medical Officer in charge.

Medical comforts on board hired ships.

68. The Principal Medical Officer when inspecting the medical arrangements for Troops to be embarked, as required under Section 17 of the Queen's Regulations and Orders for the Army 1873, will ascertain that the regulated medical comforts for the numbers and duration of the voyage, as well as such additional articles as he may have suggested, are on board.

Medical comforts on board hired ships.

69. Should the medical comforts on board be inadequate, the Medical Officer in charge is at liberty during the voyage to draw from the Master such cabin stores as he may consider necessary, and for which payment will be made by the Admiralty; and on arrival in any port should he estimate that the medical comforts remaining on board will be insufficient for the rest of the voyage, he will represent the same to the Commanding Officer, in order that he may take the necessary steps for obtaining a further supply.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

70. The Medical Officer will enter daily in the Diet Sheet, W.O. Form 1145 (recording the total quantities in his Journal), such medical comforts as he may administer to patients. The Diet Sheet will be examined at the port of disembarkation, or at Netley, by the Principal Medical Officer, who will satisfy himself as to the correctness and necessity of the issues. On the termination of the voyage the Medical Officer in charge will sign a receipt for everything he has drawn from the Paymaster on board Her Majesty's ships, or from the Master in the case of a hired vessel. Expenditure of Medical comforts.

71. The Principal Medical Officer when inspecting the Medical arrangements for Troops about to embark, will see that the Medical Officer in charge is provided for the voyage with the means of keeping his Medical Journal, and with a sufficient supply of stationery and of the necessary W.O. Forms and Books, which will be obtained on requisition. Medical Officer to be provided with W.O. forms, stationery, and books.

72. One Compounder of Medicines, one Second Corporal, and three Privates of the Army Hospital Corps, will form the Army Hospital Establishment on board each of Her Majesty's Indian Troop ships; and one Compounder, one Second Corporal and two Privates on board other of Her Majesty's Troop ships on Foreign Service, and in hired ships when considered necessary. The Compounder in addition to his other duties will Act as Ward-master. The Second Corporal will act as Assistant Ward-master, and will also perform such of the duties of Pack Storekeeper, laid down in Army Hospital Corps Regulations, as are applicable on board ship; money and other valuables in possession of the Sick will be taken over by him and handed to the Military Officer in Command of Troops and Invalids. The Pack Store Book, W. O. Book 182, will invariably be used in taking over the effects of Sick in Hospital. The directions relating to Compounders, Medicines, Medical and Hospital Stores, contained in the Admiralty Instructions for Her Majesty's Indian Troopships, will be followed. Army Hospital Corps. Establishment and duties.

73. When there are no Orderlies of the Army Hospital Corps on board ships conveying Troops, or there is not a sufficient number of the Corps for attendance on the Sick, Soldiers from Regiments or Detachments on board may be employed as Hospital Servants in the proportion laid down in paragraph 72, but the employment of Soldiers as Cooks for the Sick will not be allowed, except under urgent circumstances. Extra Sick Attendants may be employed in special cases. The Medical Officer in charge will sign a Certificate stating that the Servants were actually and necessarily in attendance on the Sick, so as to enable the Men employed to recover their extra duty pay (see Article 910 of the Royal Warrant of the 1st May, 1878 Revised Army Regulations, Vol. I) on arrival in port. The Certificate will be accompanied by a statement of the average number of Sick under treatment and in Hospital during the voyage. Soldiers employed as Hospital Servants.

Section II. General Duties.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

Medical and Surgical equipment.

74. Principal Medical Officers will be responsible that a sufficient Supply of Medicines and Surgical appliances is placed on board every ship conveying Troops. When Troops are conveyed in Her Majesty's ships between ports in the United Kingdom, the Medical Officer in charge will be provided with the Regulation "Field Companion" fully equipped, and a Surgeons case of instruments. Should any further supply of Medicines be required during the voyage, he will apply for them to the Naval Medical Officer on board.

Sick to be sent to hospital on disembarkation.

75. Medical Officers proceeding in charge of Troops will take care that any men who are seriously ill are, upon arrival at the port of disembarkation, ready to be sent at once to Hospital, accompanied by abstracts of their Cases and Medical Certificates. (W. O. Book, 172).

Documents to be rendered to P.M.O. at Port of Disembarkation, or Netley.

76. They will, without delay, report themselves for further instructions to the Principal Medical Officer at the port of disembarkation, or at Netley, and furnish him with the following documents in duplicate:—

(*a.*) Nominal Return of Men to be sent to Hospital.

(*b.*) Return of Sick on board ship, W. O. Form 294 B. Whenever the Troops embarked comprise invalids as well as time-expired or effective men, a separate return will be furnished for the invalids; and all particulars relative to the strength, cases of sickness, &c., among the invalids, will be omitted from the Return showing the details of the other portion of the force embarked.

(*c.*) A separate Report on Sickness and Medical Transactions during the voyage.

(*d.*) Return of Medical Comforts, W. O. Form 836.

(*e.*) Copies of Correspondence on Professional Points on Board.

(*f.*) Nominal List of Women who have been sick during the voyage.

(*g.*) Nominal List of Children who have been sick during the voyage.

Additional Information to be prepared.

77. They will also be prepared with information on the following points:—

(*a.*) Date of Departure of the vessel from the port where the Troops embarked, and the name of the port.

(*b.*) Length of the passage in days.

(*c.*) State health of Troops on board.

(*d.*) Whether the ship has been provided with every requisite, with special reference to the amount and quality of provisions in accordance with the scale, and with an adequate supply of water, medicines, instruments, and medical comforts.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

(*e.*) Whether the ship has been kept in a good sanitary condition in respect to ventilation, cleanliness, means of ablution, &c.

(*f.*) Whether the accommodation has been good, and whether the superficial area and cubic space per Man of sleeping accommo ation has been sufficient.

(*g.*) Whether any defects have been discovered during the voyage.

(*h.*) The number of Officers, Men, Women, and Children embarked.

(*i.*) The deaths in each class.

(*j.*) The number of births during the voyage.

(*k.*) The prevailing diseases on board, and their causes.

(*l.*) The nature of the accommodation for the reception and treatment of the Sick, including the superficial area and cubic space per sick bed.

(*m.*) When lime juice and sugar have been issued, the quantities of each supplied for each man, for what length of time used, and the total of each consumed during the voyage. A detail of names will not be required.

W. O. Books, Medical History sheets, and Medical Journal.

78. Medical Officers in charge prior to their arrival will also complete and have ready for the inspection of the Principal Medical Officer at the port of disembarkation, or at Netley, the Admission and Discharge Book, W. O. Book, 27; Medical Case Book, W. O. Book 187; Requisition Book, W. O. Book 30; Medical History Sheets, W. O. Form 1143; Pack Store Book, W. O. Book, 182; and Medical Journal.

Medical Certificates to be forwarded.

79. They will fill up the Medical Certificates (W. O. Book 172) with the result of cases of sickness embarked, and transmit them to the Principal Medical Officer in order that the result may be entered in the Admission and Discharge Book at the Hospital of the Station from which the Sick proceeded.

Section 17, Queen's Regulations: movement of troops by sea.

80. Medical Officers proceeding in charge of troops on board ship will make themselves specially acquainted with Section 17 of The Queen's Regulations and Orders for the Army, 1873, referring to the movement of Troops by sea, as well as with the sanitary duties laid down in Part 5, Sec. VII of these Regulations.

PART 2.—ARMY HOSPITALS.

SECTION I.—ORGANIZATION AND GENERAL MANAGEMENT OF HOSPITALS.

81. Hospitals are classified as follows :—

a. General Hospitals.
b. Station Hospitals.
c. Non-Dieted Hospitals.
d. Female Hospitals.
e. Field Hospitals.

Control of Hospitals.

82. All Hospitals will be under the immediate control and management of the Medical Officers appointed to the charge of them.

Discipline.

83. The Medical Officers in charge of Hospitals will be responsible to the Principal Medical Officer of the District, and will carry on the discipline of the Hospital, subject to the local Military Commanding Officer.

General and station hospitals diet.

84. General Hospitals and Station Hospitals will be fully equipped and dieted agreeably to Part 2, Sections II, III, VII.

Non-dieted hospitals.

85. Non-Dieted Hospitals will be equipped according to instructions contained in the Regulations for Non-Dieted Hospitals. Part 2, Section IV.

Female hospitals.

86. Female Hospitals will be dieted and equipped according to the Regulations for Female Hospitals. Part 2, Section IV.

Field hospitals.

87. Field Hospitals are of two kinds, as laid down in the Regulations for Field Hospitals. Part 2, Section VI.

Medicines and surgical equipment.

88. All Hospitals will be provided with Instruments, Material, and Medicines, agreeably to Part 3, Sections I and II, of these Regulations.

SECTION II.—GENERAL HOSPITALS.

I.—Organization.
II.—Principal Medical Officer.
III.—Sanitary Officer.
IV.—Registrar.
V.—Nurses.
VI.—Army Hospital Corps, and Medical and Surgical Supplies.

I.—ORGANIZATION.

89. General Hospitals will be organised under the following Officers:—

Principal Medical Officer.
Sanitary Officer.
Registrar.
Superintendent of Nurses.
Officer of Orderlies, Army Hospital Corps.

II.—PRINCIPAL MEDICAL OFFICER.

90. The Principal Medical Officer will be nominated by the Director General of the Army Medical Department, will be removable by him, and will be subject to his directions in all matters connected with the Military discipline and professional management of the Hospital. Appointment of Principal Medical Officer.

91. Subject to the General Officer Commanding the District, he will have Military Authority over all Medical Officers, Officers, Non-Commissioned Officers and Privates of the Army Hospital Corps allowed to the Hospital, over all patients in Hospital, and Non-Commissioned Officers and Privates of other corps attached to the Hospital for duty, without their own Officers; and will be responsible for the discipline of the whole establishment. Disciplinary Power.

92. He will personally superintend the treatment of the sick, in order to ensure proper attention on the part of the Medical Officer and attendants; and will detail such Orderly Medical Officers, and such night guards of Army Hospital Corps as he may consider necessary. He will also see that all returns and reports required by the Director General are prepared and forwarded. Superintendence.

93. He will satisfy himself as to the clothing, bedding, and comfort of the sick; and as to the quality and cooking of diets. Hospital equipment.

94. He will direct a list of Medicines and Medical and Surgical appliances required for the Hospitals, to be made out at the Medicines and Surgical appliances.

PRINCIPAL MEDICAL OFFICERS—continued.

usual periods, and transmitted to the Director General of the Army Medical Department.

Stores and equipment to be in good condition and according to occupation.

95. He will ascertain that the stores and equipment of the hospitals which are under the responsible charge of the Officer of Orderlies, are according to regulation, in good condition, and sufficient for the requirements of the Hospital, according to maximum occupation during the preceding three years. He will direct the Officer of Orderlies to keep the equipment up to this standard.

Requisitions.

96. He will ascertain that the Officer of Orderlies forwards timely requisition for all provisions, stores, and transport that may be necessary, to the Commissariat Officer in charge.

Repairs.

97. He will direct the Officer of Orderlies to forward to the Royal Engineer Department a statement of any alterations or repairs to buildings that may be required, or for any changes or improvements in the sanitary arrangements of the Hospital or vicinity.

Labour supplies or equipment required under emergent circumstances.

98. Under emergent circumstances, he will direct the Officer of Orderlies to hire or provide any transport, labour, supplies, or equipment which cannot be obtained from the Commissariat in charge, and which he considers to be absolutely necessary for the Hospital. In these cases the authority of the General Officer Commanding, and covering approval of the Secretary of State will be at once applied for.

Urgent repairs.

99. He will be empowered to call upon the Triennial Contractor for the Royal Engineer Department or his agent, or, in the Contractor's default or absence, on some other local tradesman, to carry out such urgent repairs, or sanitary alterations to buildings as the Royal Engineer Department may not be in a position to perform without delay, and which he considers indispensable and urgent. In all such cases, he will at once send to the Commanding Royal Engineer a copy of the order he may have given, to enable that Officer to arrange for the payment of the work, the cost being chargeable to the vote for works.

Requisitions on Commissariat and Royal Engineer Departments.

100. He will approve all requisitions made by the Officer of Orderlies on the Commissariat Department for equipment, and for all services on the Royal Engineer Department, and will state when these requirements are of an urgent nature.

Visitors to Patients.

101. He will issue orders for the hours during which patients in Hospital may receive visits from their friends or comrades.

III.—SANITARY OFFICER.

Principal Medical Officer—responsible Sanitary Officer.

102. The Principal Medical Officer in charge of a General Hospital is the responsible Sanitary Officer; but he may detail a Medical Officer to assist him in making sanitary inspections and reports.

IV.—REGISTRAR.

103. In every General Hospital a Medical Officer will be appointed by the Director General of the Army Medical Department to act as Registrar, and keep the Statistics of the Hospital. Appointment of Registrar.

104. The Registrar will compile all statistical returns that are required by regulation, or may be called for from time to time, taking the Admission and Discharge Book as his only guide for information and statistics, and dealing with each patient as a unit in a sick population of which he has to give a complete account. Statistical Returns.

105. He will draw up all reports necessary to explain the returns, submitting them to the Principal Medical Officer for approval before embodying them in that portion of any Return set apart for such remarks; he will also prepare the general reports, furnished by the Principal Medical Officer, from all available information; but such reports will not deal with the specialities of cases or details of treatment. Reports explanatory of Statistical Returns.

106. He will enter the name of every man admitted into Hospital, whether requiring treatment or not, or whether suffering from disease or not, in the Admission and Discharge Book (W.O. Book 27) filling up the various headings from the man's documents, leaving the column for diseases, wards, &c., blank, till supplied with a report giving the man's disability as diagnosed by the Medical Officer under whom he is placed in Hospital, which information, together with the name or number of the ward and division in which the patient is being treated, will be conveyed to him by medical certificate immediately the diagnosis is determined. Name of every man admitted into hospital to be entered in Admission and Discharge Book.

107. Cases not diagnosed in time, will be shown in the Weekly Returns as "not yet diagnosed," and if eventually the men be pronounced to be free from disease, and fit for duty, they will be so accounted for in the Weekly State, and also in the Admission and Discharge Book. Cases not diagnosed.

108. He will assign each patient on admission an index number (the printed or black ink number in column 1 of Admission and Discharge Book), which will accompany him through every stage of his sojourn in Hospital, and this number will be entered upon every record or other document having reference to the man's medical history during his stay there. Index Number for each Patient.

109. He will, in the event of the admission into Hospital of cases not to be included in the general Returns, or to be accounted for separately, make the entries in the Admission and Discharge Book in the following manner; viz., the consecutive or index numbers in the first column, either printed or in black ink, to apply to the whole admissions for the year from No. 1 upwards; the different classes, say for example "invalids," "duty men," "Army Hospital Corps," being respectively distinguished by a continuous supernumerary number, in the order of admission of Entries in Admission and Discharge Book.

REGISTRAR.—continued.

each class, placed in different coloured inks below the index No., say, for example, "Red" for invalid, "Black" for duty men, "Blue" for Army Hospital Corps; thus $\frac{10}{1}$, $\frac{84}{5}$, $\frac{120}{15}$, would represent the 10th general admission, but the 1st of invalids; the 84th general admission, but the 5th of duty men; and the 120th general admission of the 15th of Army Hospital Corps, the lower number indicating the consecutive cases of each class admitted. This will enable the number of each class admitted to be easily dealt with separately, and facilitate the compilation of any requisite returns by classes.

Registrar to be present on the arrival of Invalids.

110. He will be present with a clerk at the hour of admission each day and at all times on the arrival of a party of invalids, to enter the names of all men admitted in the Admission and Discharge Book, and to see that the names of invalids correspond with the particulars in each nominal roll.

111. He will be informed at once of the arrival of invalid parties by an orderly sent by the Medical Officer on duty, and should he be necessarily absent he will arrange with some responsible Medical Officer for the due performance of these duties on his behalf.

Change in nomenclature of disease.

112. He will be immediately informed by the Medical Officer in charge of the case of every change in the nomenclature of disease arising during the progress of the case; this information to be communicated by medical certificate.

Final discharge from hospital.

113. He will, on the final discharge of a soldier from Hospital, or when his case is otherwise disposed of, fill up the remaining columns in the Admission and Discharge Book, the necessary information having been at once communicated to him, by medical certificate, by the Medical Officer who has had charge of the case during its last stage.

Books, Forms, and Returns, relating to Invalids.

114. He will, at Hospitals where invalids are admitted or disposed of, keep all books, forms, or returns in connection with them that may be required by regulation, receiving the necessary information from the invalid's documents, which will be handed to him on their arrival at the Hospital, which documents will be available through him for the information of the Medical Officer in charge of the case. On the final disposal of all invalids' cases the detailed medical histories will be completed and retained in the registry for permanent record there.

Medical History Sheets.

115. He will take charge of, keep up, complete at termination of case, and transmit to their final destination, as laid down by regulation, the Medical History Sheets of all men admitted, but these documents will be available through him for the information of the Medical Officer in charge of the case during its treatment.

Custody of Case Books.

116. He will, when Medical and Surgical Case Books which have been in use in the Hospital have been filled up, and are no

REGISTRAR—continued.

longer required in the wards, be charged with their permanent custody; and he will take care to have them properly numbered and arranged to facilitate easy reference to their contents.

117. He will, when this duty is not otherwise provided for, have charge of and be responsible for the meteorological instruments, and the proper registration of the observations requisite to enable him to prepare the return of these observations. Meteorological Instruments and Returns.

118. He will, from the information contained in his Admission and Discharge Book, furnish the Principal Medical Officer with a morning daily state of sick, and such other particulars as to vacant beds, &c., in divisions and wards as may be called for. Daily State of Sick.

119. In carrying out these duties, it is to be distinctly understood— Further Instructions.

a. That only one Admission and Discharge Book (W.O. Book 27) numbered from No. 1 upwards for each year is to be used, in which the name of every man, whether invalid or soldier, of whatever corps or from whatever station, is to be recorded in the order of admission. In the event of W.O. Book 27 being insufficient for the number of admissions, a second or as many books of the same Form as may be required can be taken into use, the numbers from No. 1 upwards being made continuous throughout the whole series for the year.

b. That at all times the Medical Certificate will be the means of communicating information to the Registrar, or to and from one Medical Officer to another.

V.—NURSES.

120. A Superintendent of Nurses, with the necessary Staff of Trained Nurses, will be appointed by the Secretary of State on the recommendation of the Director General of the Army Medical Department to General or other Hospitals, and no Nurse will be appointed to or removed from a Hospital without reference to the Director General. Superintendent and Staff of Trained Nurses.

121. The Superintendent and Staff of Sisters will receive their instructions with regard to the nursing arrangements from the Medical Officer in charge of the Hospital to which they may be attached. Instructions and arrangements.

122. The Superintendent will select and dismiss sisters, subject to reference in each case to the Director General of the Army Medical Department, through the Medical Officer in charge of the Hospital, and Principal Medical Officer of the District. Selection and dismissal of nursing sisters.

123. She will exercise control and supervision over the Nursing Sisters. Supervision of nurses.

124. She will allot specific duties to them and will place Duties to be allotted.

NURSES—continued.

each in charge of one or more wards, as may be considered necessary by the Medical Officer in charge, and will be assisted in the wards by orderlies of the Army Hospital Corps.

Night duties.

125. She will not be expected to arrange for night duties, unless her establishment of Nursing Sisters is on a war footing, or considered sufficient for the duty by the Principal Medical Officer of the District.

Infectious Female Wards.

126. She will not be expected to take charge of, or detail Nursing Sisters for duty in the Infectious Female Wards.

Nurses not required in certain wards.

127. The Nursing Sisters will not be required to serve in venereal or convalescent wards but only in the general wards of the hospital.

Hours of attendance.

128. They will enter on their ward duties each day at such hour as the Superintendent may direct under the instructions of the Medical Officer in charge of the hospital.

Duties in the wards.

129. They will be responsible that arrangements are made for the personal cleanliness of the patients; that the wards, and furniture and utensils therein are kept clean; that the orders of the Medical Officer are obeyed; and that helpless patients are washed before the morning visit of the Surgeon.

Charge of keys.

130. They will keep the keys of store closets or lock-up places in the wards, and nothing belonging to the wards will be kept in the sisters' room.

To be present at surgical operations.

131. They will be present and render assistance at Surgical operations if required.

Instructions to orderlies.

132. They will give such instructions to the orderlies attached to or serving in their wards, as may be necessary.

Discipline in the wards.

133. They will report any neglect of duty, impropriety of conduct or breach of discipline, either by the orderlies or patients in their wards, to the Superintendent, who will report immediately to the Medical Officer in charge; on an emergency she will report directly to the Medical Officer on duty.

134. They will not be employed to bring diets or extras to the wards.

To carry out directions of Medical Officer.

135. They will carry out the directions of the Medical Officer with regard to the application of dressings, and observe the hours for administration of diets, extras, or medicines, as written in the ward book, or specified by the Medical Officer.

Administration of medicines and medical comforts.

136. Medicines, wine, spirits and malt liquors will always be administered during the day by the Sister, at the hours and in the quantities ordered by the Medical Officer.

Nurse to attend Medical Officer.

137. The Surgeon of Division or prescribing Medical Officer of a ward, as the case may be, in any General or other Hospital where there are Nurses, will require the Nurse to attend him in his visits, and will deliver to her his orders with reference to the sick; but when he considers that any change of arrangements of duty is desirable, he will communicate on the subject directly with the Superintendent of Nurses.

NURSES—continued.

138. The Medical Officer will notify immediately to the Superintendent any neglect of duty or misconduct on the part of a Nurse, in order that the necessary steps may be taken by the Superintendent.

Neglect of duty on the part of a Nurse.

VI.—ARMY HOSPITAL CORPS, AND MEDICAL AND SURGICAL SUPPLIES.

139. The necessary medical and nursing establishments of the Army Hospital Corps will be detailed, and the supply of Medical and Surgical Material will be laid down by the Director General of the Army Medical Department, for each General or other Hospital.

Army Hospital Corps and Medical Supplies.

140. The establishments referred to in the foregoing paragraph will in matters of discipline and in all other respects be under the direction and control of the Principal Medical Officer, or Medical Officer in charge of the hospital.

Discipline of Army Hospital Corps.

SECTION III.—STATION HOSPITALS.

For what purpose established.

141. Station Hospitals will be for the reception and treatment of sick from all Corps in Garrison, including those of the Auxiliary Forces when embodied, and such other soldiers, seamen of the Royal Navy, and Royal Marines, as the Officer commanding the Station may direct to be admitted therein.

Administration.

142. All Station Hospitals will be subject to the authority of the General or other Officer in command of the Troops, but the internal administration will be under the control and superintendence of the Principal Medical Officer of the District, who will be responsible that the arrangements are suitable and in accordance with existing regulations.

Medical Officer in charge.

143. The Director General of the Army Medical Department will especially appoint a Medical Officer to the charge of each Station Hospital at such places as may be deemed necessary, and this Officer will not be subject to removal without the Director General's sanction. At Stations where there is a Brigade Depôt the Surgeon-Major in charge of the Depôt will, as a rule, have charge of the Station Hospital, in addition to his other duties; the charge of the Station Hospital will otherwise devolve on the Senior Medical Officer present, in addition to his other duties.

Medical Staff at certain Station Hospitals.

144. The Director General will appoint to certain Station Hospitals a fixed Staff of Medical Officers, who will act under the Medical Officer in charge, and the Officers appointed to the Staff will not be moved by the Principal Medical Officer of the District without reference to the Director General, except under very urgent circumstances, which will be reported at once to the Director General.

Distribution of Sick.

145. Station Hospitals will be for the treatment of sick generally, and the Medical Officer in charge will at his own discretion appropriate wards for the treatment of infectious or contagious diseases, lunatics, sick prisoners, ophthalmic, or other special cases.

Army Hospital Corps, discipline and control of.

146. The establishment of Officers, Non-commissioned Officers, and Men of the Army Hospital Corps, and others appointed for duty in the Hospital, will be under the disciplinary control of the Medical Officer in charge of the Hospital, from whom will emanate all instructions, orders, arrangements, and details for carrying on all duties connected with the Hospital.

Hospital accommodation.

147. The Officer of Orderlies will take over from the Commissariat Officer in charge the duly appropriated Hospital

STATION HOSPITALS.—continued.

accommodation except what may be deemed to be absolutely necessary for Commissariat Hospital Reserve Stores. He will then hand the same over to the Steward at Out-Stations, who will be responsible to the Officer of Orderlies.

Hospital enclosures.

148. Hospital enclosures will be allotted to the Officer of Orderlies by the Commissariat Officer in charge, and be dealt with as part of the Hospital premises. A Hospital servant will act as gardener where necessary, and all requisitions for the proper maintenance and repairs of such enclosures will be made on the Royal Engineer Department.

Equipment and stores.

149. Every Station Hospital will be equipped according to the regulated scale laid down in the Regulations for the Commissariat Department [Revised Army Regulations, Vol, IV. Part I, Section XI], the proportion of stores being calculated on the maximum occupation during the preceding three years.

Responsibility.

150. This equipment will be issued by the Commissariat Department on inventory to the Officer of Orderlies, who will then become financially responsible for the same.

General Inventories.

151. A general inventory (W. O. Form 1411) of furniture, utensils, bedding, and clothing will be prepared in duplicate by the Commissariat Department for each Hospital in the district. These inventories will be signed by (*a*) the Commissariat Officer in charge, and (*b*) the Officer of Orderlies and Steward responsible for the care and safe custody of the stores. One copy of the inventory will be retained by the Commissariat Department and the other by the Officer of Orderlies. A third copy, if requisite, may be made out by the person having the actual custody of the stores.

Ward Inventories.

152. Inventory boards, one showing the fixtures (to be signed by an Officer of the Royal Engineer Department), the other, the furniture and utensils, (to be signed by the Commissariat Officer in charge), will be made out and hung up in each ward or room.

Alterations in ward inventories.

153. No alterations or additions will, under any circumstances, be made in the inventory boards, except by the respective Officers of the Royal Engineer or Commissariat Departments.

154. Care will be taken not to enter on these boards any of the articles of personal equipment mentioned in paragraph 115 (K) and Appendix, page 42, Army Hospital Corps Regulations.

Necessity for alterations to be notified by Officer of Orderlies.

155. Should it at any time be absolutely necessary to make any alteration in the number of articles in a room or ward, due notice thereof will be given by the Officer of Orderlies to the Commissariat Officer in charge, in order that he may prepare fresh inventory boards.

Bedding not to be entered on Inventory Boards.

156. Bedding in wards will not be entered on the inventory boards, but in a Bedding Book, W. O. Form 54, altered to meet the description of Hospital stores.

STATION HOSPITALS—continued.

Bedding account with Wardmasters.

157. The Steward or other person in charge of the equipment will open an account in a Bedding Book against each Wardmaster.

158. Each Wardmaster will be supplied with a bedding book.

Transactions between Steward and Wardmaster.

159. All transactions between Steward and Wardmaster will be duly recorded therein, and the signatures of both issuer and receiver will be attached in the columns set apart for that purpose.

Quarterly inspection by R.E.D. and Commissariat Department.

160. At the quarterly inspections made by an Officer of the Royal Engineer and Commissariat Departments, the Officer of Orderlies will attend.

Inspecting Officers to verify the balances in Bedding Books.

161. At monthly and quarterly inspections the Officers will be careful to verify the balances of bedding in charge of each Wardmaster, and see that the totals of the Bedding Books agree with the Steward's bedding book.

Exchange of soiled linen, &c.

162. All articles requiring to be washed will be handed over to the Commissariat Officer in charge in exchange for a similar number of clean articles. Should it, however, be found more convenient, under exceptional circumstances, for the articles to be issued to, and received direct from, the contractor or laundry, this will be done under the direction of the Commissariat Department, and a barrack serjeant will be present at the issue and return of the articles. The Washing Book (W. O. Book 175) will be kept by the Commissariat Department.

Transfer of Steward, &c.

163. On the transfer of a Steward or other person having the custody of stores from one hospital to another, steps will immediately be taken to ensure the stores being counted and duly handed over to his successor. The Officer of Orderlies will be present at the transfer.

Transfers to be witnessed by Commissariat Officer.

164. Transfers from one Officer of Orderlies to another will be witnessed by the Commissariat Officer in each Sub-District from whom the stores are held on inventory, unless an Officer from the Surveyor General's Department is specially nominated to attend.

Non-dieted Hospitals.

165. In non-dieted Military Hospitals which are in charge of Civil Practitioners, the number of beds considered necessary by the Director General of the Army Medical Department, for the treatment of severe cases, will be fully equipped and handed over by the Commissariat Department to the Officer of Orderlies, who will place the equipment under charge of a Non-commissioned Officer of the Army Hospital Corps.

Assessment of damages.

166. Damages to buildings will be assessed by the Royal Engineer Department, and those relating to damages to Hospital clothing and stores, or charges for the loss of Hospital clothing and stores, by the Commissariat Department, according to the instructions laid down in the Queen's Regulations and

STATION HOSPITALS—continued.

Orders for the Army, 1873, section 15, paragraphs 26 to 30; Regulations for the Commissariat Department, Part I., section XI (Revised Army Regulations, Vol. IV.); and Regulations for the Royal Engineer Department, section IV (Revised Army Regulations, Vol. V.) These charges will be noted in the Personal Charge Book (W.O. Book 51), referred to in the Army Hospital Corps Regulations, paragraph 118, and be dealt with as directed therein.

Assessment of general charges for damages.

167. General charges for damages or deficiencies attributable to wantonness or neglect, will be assessed by the Royal Engineer and Commissariat Departments, proportionately against Regiments or Corps, as hereinafter provided in paragraph 200 of these Regulations.

Duties of Medical Officers in charge.

168. The Medical Officer in charge will distribute the duties between himself and the Medical Officer serving under him, and will exercise a general supervision over all the sick in Hospital, and the expenditure of medicines, diets, and extras.

Responsibility of Medical Officers in charge of serious cases.

169. Each Medical Officer will be responsible for the Medical treatment, dieting, and nursing of the patients under his care; but the attention of the Medical Officer in charge will be drawn to any serious cases under the care and treatment of the Medical Officer serving under him.

Matters of doubt and difficulty.

170. All matters of doubt and difficulty either in the management of the sick or in Hospital administration, which cannot be decided by the Medical Officer in charge, will be referred by him in writing to the Medical Principal Officer of the district.

Compounder of Medicines.

171. A duly qualified Serjeant of the Army Hospital Corps will be appointed at such Hospitals as may be decided on by the Director General to act as a Compounder of medicines. He will be responsible under the Medical Officer for the care and safe custody of the medicines, surgical appliances and instruments, and for the careful dispensing of the medicines. Medicines of a poisonous nature, and expensive drugs, will be kept under lock and key.

Responsibility of the Medical Officer in charge.

172. The Medical Officer in charge will be held directly responsible for all the duties of the Hospital. He will take care that the instruments, medicines, Hospital equipment, clothing and stores held on inventory are in good condition, sufficient, according to regulation, and kept in safe custody; that the supplies are of good quality, and that the cooking and distribution of the diets are properly carried out.

Requisitions for supplies.

173. Requisitions for Hospital supplies from the Commissariat Department or from contractors will be prepared and signed by the Officer of Orderlies attached to the Hospital, or by the Steward where there is no Officer.

Counterfoils of requisitions.

174. The details of requisitions will be fully entered on the counterfoils, and these also will be signed by the Officer or

STATION HOSPITALS.—continued.

Non-commissioned Officer of the Army Hospital Corps who prepares them. The counterfoil will be retained as an office record.

Attendance of Medical Officers at Hospital.

175. Medical Officers will visit the Hospitals twice daily, and at such other times as may be required. At Home Stations, the hours of morning visit will be before 10 o'clock a.m., and the hours of evening visit between 5 and 8 o'clock. At Foreign Stations, the morning and evening visits will be made at such hours as are suitable to the climate and station.

Men sent for admission.

176. The men of each Corps sent for admission will be accompanied by a Non-commissioned Officer, who will bring with him the sick reports in duplicate, as laid down in General Order 14 of 1874, and General Order 20 of 1876.

Time for arrival of Sick at Hospital.

177. Except in case of accidents or other emergencies, the sick will, at Home Stations, arrive at the Hospital before 9 a.m. in summer, and 10 a.m. in winter. At Foreign Stations, they will arrive at such suitable hours as may be determined upon.

Course on arrival at Hospitals.

178. The Medical Officer in charge will examine, as soon as possible, all men sent to Hospital, will diagnose their diseases, and allot them to wards. He will cause the names of those admitted to be entered with the particulars in the Admission and Discharge Book (W.O. Book 27), the disease and the word "Hospital" being entered in ink opposite each man's name on both the sick reports: one of these will be returned without delay to the Officer commanding the Corps; the other will be retained as an office record.

Men detained in Hospital.

179. In the event of a sick soldier not being likely to require treatment beyond the day on which he has reported himself sick, he will be detained in the Hospital for that day only and subsisted from his Corps, to which he will return if considered fit for duty; but if at the evening visit he is found unfit for duty, he will be regularly admitted and placed on Hospital diet for the following day, notice to that effect being sent to the Officer commanding the Corps.

Preparation of Diet Sheets, Provision Tickets, &c.

180. When men are admitted into Hospital, the headings of the Diet Sheets (W.O. Form 1145) will be filled in immediately from the Morning Sick Reports by the Wardmaster, who will transmit these sheets daily, after the diets and extras are entered, to the Steward, to enable him to prepare the Provision Ticket (W.O. Form 183), in duplicate, to which his signature will be attached. He will send one copy to the Wardmaster to enable him to enter an abstract of the diet and extras on W.O. Form 175, the other to the Cook that he may distribute the diets for the respective wards. W.O. Form 175 will be signed daily by the Medical Officer in charge, and at the end of the month will be completed and forwarded to the Commissariat Officer in charge, with W.O. Form 184.

Section III. Station Hospitals.

STATION HOSPITALS—continued.

181. From the information contained on the Provision Ticket (W.O. Form 183), the Steward will keep a daily record on W.O. Form 185 of the number and description of diets and extras issued to each ward. This form will be examined daily by the Officer of Orderlies attached to the Hospital, if present, and completed at the end of the month by the Steward, who will sign and submit it for the examination and signature of the Officer of Orderlies; after which it will be retained as a Hospital record. Preparation of W.O. Form 185.

182. On the last day of the month a statement of all receipts and issues during the period will be prepared by the Steward on W.O. Form 184, which will be submitted for the examination and signature of the Office of Orderlies attached to the Hospital, and forwarded to the Commissariat Officer in charge. Preparation of W.O. Form 184.

183. The names of men intended for discharge from Hospital will be sent as early as possible to the Officer Commanding the Corps, on W.O Form 986, in order that a Non-commissioned Officer may be sent to conduct the men discharged back to barracks at such suitable hour in the afternoon or evening as may be determined on. Notice to be sent to Commanding Officer of men discharged.

184. When a man is discharged from or dies in Hospital, the Medical Officer in charge of the case will immediately acquaint the Medical Officer in charge of the Hospital, and all deaths will be at once reported to the Officer Commanding the Corps, as well as to the Officer Commanding the Station, on that portion of W.O. Form 986 set apart for that purpose; and the date on which the interment may take place will be stated. Men discharged and deaths.

185. Whenever it may be necessary to bring forward soldiers for discharge as Invalids, notice of such intention will be sent by the Medical Officer in charge of the Hospital to the Officer Commanding the Corps, who will furnish all the information as to service and other details, required on the first page of W.O. Form 891. Invaliding.

186. All medical documents in connection with the Invalids will be prepared by the Medical Officer under whose care the case may be, and they will be sent to the Medical Officer in charge of the Hospital for examination, counter-signature, and transmission to the Principal Medical Officer of the District. Invaliding documents.

187. In Station Hospitals separate Admission and Discharge Books, on W.O. Book 27, will be kept for (*a*) Regular Troops; (*b*) for Troops of the Auxiliary Forces; and (*c*) for Seamen of the Royal Navy, Royal Marines, Foreign Sailors, and others that may be admitted into Hospital under the special sanction of the Officer Commanding. Admission and Discharge Books will be permanently retained in the Station Hospitals. At the end of each year a space will be left in the Admission and Discharge Books before commencing the entries for the following year. Admission and Discharge Books.

Section III. Station Hospitals.

STATION HOSPITALS—continued.

Medical History sheets.

188. The Medical History Sheets of all Corps will be retained at General and Station Hospitals, and on removal of Corps the sheets will be completed and handed over by the Medical Officer in charge of the Hospital to Commanding Officers.

Daily state of Sick.

189. The Medical Officer in charge will furnish a daily state of the Sick in Hospital to the Officer Commanding the Station, on W. O. Form 986. At the Head Quarters of the District this state will be sent to the Principal Medical Officer for transmission to the Officer Commanding.

Transmission of Dietary Returns, &c.

190. The Diet Sheets (W.O. Form 1145), and extra sheets, (W.O. Form 1200), will be forwarded at the end of each month, as directed in paragraph 466 of these Regulations.

Diet Sheet and Extra Sheets.

191. The Principal Medical Officer will forward to the Commissary General of the District the Diet Sheets (W.O. Form 1145), and the Extra Sheets (W.O. Form 1200) as soon as possible after the close of each month. These vouchers (to support and verify the statement of provisions rendered by the Steward on W.O. Form 184) will be in original. In no instance will copies of these be substituted on account of the originals being dirty or defaced.

Preparation of Dietary Returns, &c.

192. When there is an Officer of the Army Hospital Corps attached to a Station Hospital, he will be responsible for the preparation of the Dieting Returns, W.O. Forms 183 and 184.

Stoppage returns.

193. He will also make out the stoppage returns, W.O. Forms 152, 152*a*, and 152*b*, from the Admission and Discharge Book, in duplicate, and submit them to the Medical Officer in charge for counter-signature and transmission, one copy being sent to the Paymaster of the Corps. These stoppage returns should in all respects agree with the abstract entered on the first page of W.O. Form 184, and if a discrepancy is discovered in the stoppage accounts, the necessary correction of W.O. Form 184 will be notified to the Commissariat Department.

Articles for cleaning purposes.

194. Articles for cleaning purposes will be drawn from the Commissariat Department monthly, in accordance with the scale laid down in the Appendix to Clause 177, Army Circulars, 1874, and the directions in Clause 91, Army Circulars, 1877.

Detailed expenditure of them not required.

195. No detail of expenditure of these articles will be required; the requisition duly signed, and signed a second time as a receipt, is all that is necessary.

Fuel.

196. Fuel will be drawn from the Commissariat Department; in accordance with the scale laid down in the Regulations relating to fuel and light in Clause 56 (*b*) Army Circulars 1878, in convenient quantities sufficient for a period not exceeding one month. The requisition will not show details, but merely state the quantity required. The Officer of Orderlies or Steward will sign the requisition, and sign it a second time as having received the supply, thus rendering at the same time both requisition and receipt.

STATION HOSPITALS—continued.

197. The daily expenditure of the supplies of fuel will be shown in detail on W.O. Form 1417, which will be submitted in original to and signed by the Medical Officer in charge every day, in the column for remarks, and at the end of the month this form will be completed, both as regards the recapitulation and expenditure, and signed by the Officer of Orderlies or by the Steward. It will then be countersigned by the Medical Officer in charge, and forwarded to the Commissariat Officer in charge. Detail of expenditure.

198. Monthly inspections will be made by the Officers of Orderlies at all Stations, to ascertain if the fixtures, equipment, and stores in charge at each Hospital are complete, conformably to section 15, paragraph 26, Queen's Regulations and Orders for the Army 1873. Quarterly and monthly inspection of Stores.

199. At these inspections the Officer of Orderlies will examine the Steward's books and records, reporting the result to the Medical Officer in charge of each Hospital.

200. The Officer of Orderlies will furnish the Royal Engineer and Commissariat Departments, at their quarterly or marching-out inspection, under the Regulations of those Departments respectively (Revised Army Regulations, Vols. IV and V), with such information as may be necessary to enable the damages and deficiences to be assessed against the Regiments or Corps whose sick have been treated in Hospital, or against those connected with the Hospital, as the case may be. Charges to be levied against Regiments or Corps, or those connected with the Hospital.

201. On the relief of the Medical Officer in charge of a Station Hospital he will prepare, in duplicate, a transfer return of all instruments, medicines, and appliances, on W.O. Form 299, with all particulars showing the expenditure up to date; one copy will be forwarded to the Director General, Army Medical Department, the other will be retained at the Hospital. A manuscript transfer return of all medical records, books, and other documents in use will likewise be prepared in duplicate, and similarly dealt with. Transfer returns of instruments, medicines, &c. Records, books, and documents.

202. A transfer return of Blank W.O. Forms and Books will be prepared in duplicate on W.O. Form 165; one copy will be sent to the Principal Medical Officer of the District, and retained by him, the other will be kept in the Hospital; a transfer return of stationery in duplicate will also be made out and disposed of in the same manner. All these transfer returns will be signed both by the Officer giving over, and the Officer assuming, charge. Blank W.O. Forms. Stationery.

203. Whenever it becomes necessary to employ soldiers in Hospitals in substitution of, or addition to the Staff of the Army Hospital Corps, the following will be the proportions authorised to be employed, viz.:— Employment of extra Orderlies.

When the sick exceed 10	1 Non-Commissioned officer, 1 Private as cook, with orderlies, at the rate of 1 for ten patients.

STATION HOSPITALS—continued.

When there are at least 5 patients over the 10 or multiple of 10	1 Orderly in addition to the above.
When the sick exceed 50	A Non-Commissioned Officer as cook, with one private as Assistant Cook.

Special Orderlies.

204. Special Orderlies in excess of the numbers specified in paragraph 203, will only be employed with the sanction of the Principal Medical Officer, who will in such cases report the circumstances under which he approved their employment to the Director-General of the Army Medical Department, for the information of the Secretary of State.

Charges for men unauthorised will be disallowed.

205. Any charges for men employed without the Director General's sanction, or on insufficient grounds, will be disallowed, and made against the Medical Officer under whose authority they were employed.

Monthly return of men employed.

206. At the end of every month the Medical Officer in charge will send to the Paymaster of each Regiment to which the soldiers employed in Hospital duties belong, a return on W.O. Form 194 of the men necessarily employed.

Books.

207. The following books will be kept on charge at the Station Hospital and produced when required by the Principal Medical Officer of the District:—

British Pharmacopœia.
Snellen's Test Types.
Priced Vocabulary of Stores.
Test Dot Cards, W.O. Form 1233.
Army Medical Reports, commencing at 1874.
Hospital Ready Reckoner.

Stationery, &c.

208. Stationery will be supplied on requisition made half-yearly, by the Principal Medical Officer, according to a regulated scale. War Office Forms and Books will be supplied from the same source on requisition made half-yearly (W.O. Form 165).

Medicines for Officers and their families, women, children, &c.

209. All medicines and surgical appliances required for Officers, their families, the wives and children of men belonging to Regiments, and others entitled by regulation to medical attendance, willbe supplied from the Hospital Surgery, at hours fixed by the Principal Medical Officer, and the Medical Officer in charge will make such arrangements for the making up of prescriptions, and the issue of medicines, as not to interfere with the working of the Hospital. Only in cases of emergency will medicines be supplied at other hours than those laid down by the Principal Medical Officer of the District.

Misconduct Returns, W.O. Form 931.

210. The Medical Officer in charge will cause a Weekly Return to be made out on W.O. Form 931 of men admitted into Hospital or discharged therefrom after treatment on account of

STATION HOSPITALS—continued.

the following diseases, viz.:—Primary Venereal affections, Gonorrhœa (fresh attacks only), and Delirium Tremens. This Return will be signed by the Medical Officer in charge and forwarded to the Officer Commanding for signature and transmission to the Paymaster of the Corps.

211. Vaccination and re-vaccination of all soldiers and recruits will be performed at Station Hospitals, where the vaccination registers will be kept, in which the names of men for all arms of the Service will be entered. Vaccination.

212. When a Corps leaves a Station, the sick under treatment in the Station Hospital will be detained till sufficiently recovered to rejoin the Head Quarters of the Corps. Sick to be detained until recovered.

213. All authorised returns required by Regiments from Station Hospitals will be sent direct to Officers Commanding Regiments or Corps, by Medical Officers in charge. Returns.

214. All applications for documents will be made in the first instance direct by Regimental Commanding Officers to Medical Officers in charge of Hospitals, or on the other hand by Medical Officers in charge to Commanding Officers; but any further reference or correspondence regarding them will be addressed, through the proper channel, to the General or other Officer Commanding the Brigade or Station. Applications for documents.

215. The assembly of Regimental Boards in Hospital will be arranged for between Officers Commanding the Corps and the Medical Officer in charge. Regimental Boards.

216. When patients in Hospital are transferred from one Corps, Battery, Troop, or Company to another, Officers Commanding Corps will inform the Medical Officer in charge of the Hospital, in writing, of such transfer. Patients transferred when in Hospital.

217. When an Officer is placed on the sick list or discharged from it, intimation will be sent immediately by the Medical Officer in charge of the case, on W.O. Form 986, to the Officer Commanding the Corps, or to the head of the Department to which the Officer belongs. Officers placed on or discharged from sick lists.

218. When sick soldiers are transferred from one Hospital to another, the Medical Certificate W.O. B. 172 will be used in conveying information. A brief detail of the case will be written on the back of the certificate which has been left blank for this purpose. Medical certificate W.O. Book 172, to be used in the transfer of a patient from one hospital to another.

SECTION IV.—NON-DIETED STATION HOSPITALS.

Where to be opened.

219. Non-dieted Station Hospitals will be opened at stations where small detachments of less than one hundred men are quartered.

Equipment.

220. At stations where the strength of the detachment is 40 and under 100, Hospital equipment on the following scale will be supplied.

221. For a strength of 40 men, two cots; for 70 men, three cots; and for 90 men, four cots.

Hospital Equipment.

222. At Stations where the detachments are under 40 men, these Hospitals will not be supplied with Hospital equipment, and men who are admitted will use the barrack bedding and utensils.

Generally under charge of Civilian Surgeons.

223. The patients in these Hospitals will be placed generally under the medical charge of Civilian Medical Practitioners.

Equipment how drawn.

224. Where Hospital equipment is sanctioned it will be drawn as directed in paragraph 165 of these Regulations, and placed in charge of a Non-commissioned Officer of the Army Hospital Corps.

When not supplied with Hospital Equipment.

225. In Hospitals where the men use their barrack bedding, application will be made to the Officer Commanding the Corps to which the sick belong for a Non-commissioned Officer to take charge of the equipment.

Hospital Orderlies.

226. Application will be made to the Officer Commanding for Hospital attendants for the sick in the proportions laid down in paragraph 203.

Rations.

227. The ordinary Commissariat ration, in lieu of a Hospital diet, will be drawn, and supplied from the regiment or detachment to which the patient belongs, or is attached.

Issue of extras.

228. The following extras will be issued when considered necessary—viz., essence of beef, tea, sugar, oatmeal, arrowroot, barley, wine, brandy, mustard, pepper, salt, condensed milk and eggs.

Extras will be drawn from the Commissariat.

229. The authorised extras will be drawn from the Commissariat Contractor on requisition (W.O. Books 189 and 190), signed by the Civilian Surgeon in charge.

Returns of extras issued.

230. In accounting for extras the following W.O. Forms will be used—viz., Diet Sheet, W.O. Form 1145, W.O. Forms 175, 184, and 185. Stoppages for extras will be forwarded in accord-

NON-DIETED STATION HOSPITALS—continued.

ance with instructions contained in paragraph 193 of these Regulations.

231. Non-dieted Hospitals will be opened for Regiments of Militia when called out for training where there are no Station Hospitals, unless there be special authority from the Director General Army Medical Department to open Dieted Hospitals.

Non-dieted and dieted Hospitals for Militia regiments.

232. Field Hospital equipment will be supplied to Militia Regiments encamped for training in accordance with the scale laid down in the Appendix, page 197.

Field Hospital equipments for Militia.

233. Medicines and surgical materials for these non-dieted Hospitals will be supplied on requisition through the Principal Medical Officer of the District.

Medicines and Surgical appliances.

SECTION V.—HOSPITALS FOR SOLDIERS' WIVES AND CHILDREN.

I.—General Rules.
II.—Hospital for cases of Parturition and General Diseases.
III.—Hospital for Infectious Diseases.

I.—GENERAL RULES.

Female hospitals at certain stations.

234. Hospitals are provided at certain stations by the special authority of the Secretary of State for soldiers' wives and children, and the same discipline and good order will be preserved in them as in other Military Hospitals.

Two kinds.

235. These Hospitals are of two kinds, forming distinct establishments, one for the treatment of cases of parturition and general disease, the other for infectious diseases.

Persons entitled to Hospital treatment.

236. The families of Non-commissioned Officers and soldiers married with leave, and on the married roll of a regiment and provided with quarters, may be admitted to these Hospitals and receive treatment at the Public expense, when there is available accommodation. Male children above the age of 10 (unless in very special cases) will not be admitted into Hospitals for women and children.

The term "Family."

237. The term family, when used in these regulations, will be understood to include the wife of the soldier, and his legitimate children and step-children under 14 years of age.

Diet and extras.

238. While soldiers' wives and children are under treatment in Hospital they will receive the same diets and extras as are authorised in the regulations for Hospital diets for soldiers, and the same returns will be used for the issue, and rendered for the expenditure of these diets and extras as are laid down for guidance in that portion of these regulations relating to dieted Hospitals.

Parturition cases.

239. The wives of Non-commissioned Officers and soldiers when occupying wooden huts, will be entitled to admission to Hospital for their confinements. When in quarters or barracks they will also be entitled to admission, except—

a. When occupying two rooms;
b. When occupying one room and without children.

General diseases.

240. Cases of serious and acute disease will only be admitted when, in the opinion of the Principal Medical Officer, the

GENERAL RULES—continued.

nature or the circumstances of the cases are such as to justify their treatment in Hospital at the Public expense. Cases of chronic disease will not be admitted without reference to, and the approval of, the Director General of the Army Medical Department.

241. When a Medical Officer considers a woman or child, labouring under serious or acute disease, requires Hospital treatment, he will submit an application for admission to the Principal Medical Officer according to the following form:— W. O. Form 881.

Station Date

Application for the admission of (a Woman or Child)
of Regiment, into the Hospital for Soldiers' Wives and Children.

Name.	Age.	Disease.	Date of Attack.	Amount and Class of Barrack Accommodation.				Remarks Explanatory of Circumstances deemed to require Hospital Treatment.
				No. of Rooms.	If in room with other families.	No. of Children.	If in Wooden Huts.	

I certify that suffers from a serious attack of acute and that I consider would be seriously endangered if left for treatment in quarters, owing to the want of proper nursing, quiet and rest.

Approved. (Signature of Medical Officer.)

Principal Medical Officer.

Patients sent to the Hospital must carry this form with them.

242. Cases of scarlet fever, diphtheria, and small-pox, when occurring in barracks or huts, will always be admitted into Hospital with a view of preventing, or limiting, the spread of such diseases. Other infectious maladies will, as a rule, be treated in quarters, and cases will only be admitted into Hospital on the order of the Principal Medical Officer, under circumstances which in his opinion justify a departure from the general rule. Infectious diseases.

243. Infectious cases will never be treated in any of the Hospitals devoted to cases of parturition and general disease.

244. The wives and children of soldiers coming to Hospital for admission, will be required to bring a certificate on W.O. Form 1135, signed by the Commanding Officer, that the applicant is the wife or child of a soldier on the married roll of a regiment and entitled to quarters. This form will also be signed by a Medical Officer, who will certify as to the nature of the disease. Certificate necessary for admission.

Section V. Hospitals for Soldiers' Wives and Children.

GENERAL RULES—continued.

Exceptional cases.

245. Cases of those who are the wives or children of soldiers not on the married roll are only admissible (upon payment of a daily stoppage of 1*s.* for each adult, and 6*d.* for each child) under exceptional circumstances, or when their removal may be deemed necessary, as a matter of safety to the troops and the public.

Form for admission.

246. Prior to admission of the cases referred to in the preceding paragraph, the sanction of the General Officer Commanding will be obtained through the Assistant Quartermaster General according to the following form :—

187 .

I recommend to the favourable consideration of the General officer Commanding, for admission to the Hospital for the Wives and Children of Soldiers, as an exceptional case, of a soldier of the Regiment under my Command, but not "on the strength."

The person is respectable and deserving of Hospital treatment.

Commanding.

The expenses of the above-mentioned person are guaranteed by me

Name

Rank

*I certify that†
now residing in barracks (or Quarters), is labouring under‡
and requires to be removed to Hospital to prevent the spread of infection.

The

A.-Q.-M.-General,

---

* The Medical Officer who sends the Patient to the Hospital will fill up and sign this certificate when the disease is of a contagious description.

† Insert name.

‡ Insert Small Pox, Scarlatina, or Diphtheria, as the case may be.

N.B.—The Medical Officer in charge of the Hospital will transmit these applications, after they have been approved of, to the Commissariat Officer.

In cases of general and infectious disease the approval of the Principal Medical Officer will be forwarded when the sanction of the General Officer Commanding is applied for.

Number of beds.

247. The authorised number of beds in each Hospital must never be exceeded, unless with the authority of the Secretary of State.

Wards.

248. At stations where Hospitals for women and children have not been established, a room in barracks, if available, may be allotted as a ward for the reception of such cases of sick women and children belonging to families on the married roll as it may be deemed expedient to remove from their quarters. Equipment and fuel and light will be provided for such ward; but it is distinctly to be understood that under no circumstances will any expense for nursing or diet be admitted as a charge against the Public, and only the medical comforts—viz., port wine or sherry,

GENERAL RULES—continued.

brandy, arrowroot, and essence of beef, or "Extractum Carnis," may be issued where there is a Hospital provision store.

249. Medical Officers will send patients requiring admission at an early hour, if possible, in order that they may be placed on diet the following day. Patients to be sent early to hospital.

250. The responsibility of Medical Officers doing duty with Corps will not cease until they have satisfied themselves that the Medical Officer in charge has actually assumed professional care of any woman or child they may have sent for admission. Responsibility of Medical Officers sending cases for admission.

II.—HOSPITALS FOR CASES OF PARTURITION AND GENERAL DISEASES.

251. The Medical Officer will be appointed by the Director General of the Army Medical Department. Medical Officer, how appointed.

252. He will be responsible for all medical arrangements and the internal management of the Hospital, and will also have control over all the servants and patients. Control of the hospital.

253. At stations where it is practicable to do so, he will give a course of practical and theoretical instruction to soldiers' wives who are desirous of becoming qualified to attend as Army Midwives and Sick Nurses on the wives and children of soldiers. Regulations on this subject for the guidance of Medical Officers will be found detailed in Appendix No. 1, page 139. Instruction in midwifery to soldiers' wives who are desirous of qualifying as midwives.

254. The Medical Officer in charge will at the end of every month forward to the Principal Medical Officer of the District for the information of the Director General, a return on W.O. Form 1020, of the patients treated in Hospital, affording at the same time any explanation that may be necessary as regards the admission of cases of general disease. Monthly return.

255. He will submit, at the end of every year, an annual report of the admissions and deaths, with remarks, on a form which will be supplied on application to the Director General, through the Principal Medical Officer of the District. Annual report.

256. A Matron will be appointed, with the approval of the Director General, to each Hospital. Appointment of Matron.

257. She will obey all regulations respecting discipline, and the proper discharge of her duties, which may from time to time be issued for her guidance, and attend strictly to the orders of the Medical Officer regarding the care and nursing of the sick, the general management, washing, warming and ventilation of the wards, the administration of diets and medicines, and cleanliness of the sick. She will also render what aid the Medical Officer may require, and be responsible for the safe custody of the equipment of the Hospital. Duties of the Matron.

258. She will not leave the Hospital without the authority of the Medical Officer. In her absence a nurse will be selected, with his approval, to supply her place. Not to leave hospital without permission.

Section V. Hospitals for Soldiers' Wives and Children.

HOSPITALS FOR CASES, &c.—continued.

Visitors.

259. No person will be allowed to pass in or out of the Hospital without the knowledge of the Matron or her Deputy.

Dieting and extra return.

260. The Matron will prepare the necessary returns for the diets and extras, referred to in paragraphs 180–182.

Nurses.

261. She will be assisted by a staff of nurses who will carry out her orders. These nurses will be required to be neat and clean in their dress; and it will be their special duty,—

a. To clean out their respective wards;
b. To attend regularly to the personal cleanliness of the patients who are helpless, and to see that those who are able to do so make use of the ablution room.

To take charge of wards and equipment.

262. They will take charge in their respective wards of the equipment as well as of all articles of clothing, and see that the patients take proper care of the articles in their possession.

Cook.

263. The Nurse who acts as cook will be careful to have the meals ready at the following hours: breakfast, 8 o'clock; dinner, 1 o'clock; tea, 5·30 p.m. No provisions will be kept in the wards.

Charge of kitchen entrance and bath rooms.

264. The cook will also have charge of the kitchen equipment, the entrance, kitchen and bath-rooms. In pressure of sickness she will be expected to assist the Nurses.

Complaints.

265. Patients having any complaints to make relative to the diet, or to any neglect or bad conduct on the part of the Nurses, will make them to the Surgeon during his visit.

Smoking prohibited.

266. Smoking is strictly prohibited, either within the hospital or its vicinity.

Equipment not to be removed from hospital.

267. Persons removing furniture or any equipment belonging to Government from the Hospital will be liable to prosecution. All wilful injury to equipment or stores will be charged as normal damages against the persons in default.

Patients to hand over articles of value.

268. Every patient upon admission will be required to hand over the money and articles of value in her possession to the Matron, who will enter them in a book in the presence of the patient, giving the latter a receipt in return. The property will be returned on the day of the patient's discharge.

Women to bring certain articles to hospital.

269. Every woman is expected to bring with her a change of linen, a brush and comb, and if admitted for confinement, infant clothes also.

Woman when sufficiently recovered to assist.

270. Such women as may be considered sufficiently recovered, will be required, if called upon, to assist the Nurses in cleaning the wards and attending on their fellow patients.

Personal cleanliness.

271. Every person who is allowed to leave her bed must be washed, have her hair neat, and her bed made up by 9 A.M. in summer, and 10 A.M. in winter.

Clothing.

272. The clothing not in use will be put away in the press, and numbered so as to correspond with the bed; the

HOSPITALS FOR CASES, &c.—continued.

other articles of dress will be neatly folded and placed on the bed box.

273. Patients will strictly obey the orders of the Medical Officer, Matron and Nurses, and will not leave the hospital without permission from the Medical Officer. Loud talking and noise are strictly forbidden. Patients to obey orders.

274. With the sanction of the Medical Officer, female relations and friends will be permitted to visit patients during the day, and husbands will be admitted to see their wives between the hours of 6 and 8 P.M. No visitor will, however, be permitted to enter or leave the hospital without the knowledge of the Matron. Only one visitor for each patient will be allowed at a time. Visitors.

275. Visitors are forbidden to bring the patients intoxicating liquors of any kind, and food will not be allowed to be brought by them into the hospital without the permission of the Medical Officer. Intoxicating liquor and food not allowed to be brought into hospital.

276. Soiled linen will be at once removed to the place appointed for it. Disposal of soiled linen.

277. To these hospitals a certain staff will be appointed who will attend all Officers and their families in the garrison; also all soldiers' wives and families, who are entitled to attendance. Staff.

278. Vaccination and re-vaccination of all Officers and their families, and of all women and children in the garrison, will be performed by the Medical Staff of the Hospital, and only one Vaccination Register will be kept for all. Vaccination. and Re-vaccination.

III.—HOSPITALS FOR INFECTIOUS DISEASES.

279. The Medical Officer who is to take charge of a Hospital for Infectious Diseases will be detailed for the duty from the extra establishment by the Principal Medical Officer of the District. Medical Officer.

280. A trained and competent Head Nurse will also be appointed by the Principal Medical Officer, and she will be assisted by as many Nurses as may be deemed necessary. Head nurse to be assisted if necessary.

281. The Head Nurse will act as Matron, and will cary out all orders of the Medical Officer in charge. To act as matron.

282. Mothers of children who are admitted will not be allowed to remain in hospital without the Medical Officer's sanction, unless suckling a child. Mothers permitted to remain in hospital will not visit the barracks without special permission. They will be required to assist the Nurses by attending to their own children's beds and keeping the wards clean. Mothers of children admitted into hospital.

283. A change of clothing will be brought with every patient, which in the case of a child will be washed by the Clothing while in hospital.

mother. On leaving the Hospital each patient will have a perfectly clean set of clothing, and that which has been in wear up to the period of leaving will be properly disinfected before being handed over to the parties to whom it belongs.

Visitors.

284. No Visitor will be allowed in hospital without the special sanction of the Medical Officer in charge.

Diet, nursing, and good order.

285. The same rules with regard to diet, nursing, cleanliness, and good order will be observed in hospitals for infectious diseases as are laid down in regulations for hospitals for parturition and general diseases.

SECTION VI.—FIELD HOSPITALS AND HOSPITAL SHIPS.

I.—Field Hospitals.
II.—Field Service.
III.—Summer Manœuvres.
IV.—Mobilization.
V.—Duties of Medical Officers attached to an Army Corps in the field on Active Service.
VI.—The Bearer column of an Army Corps.
VII.—Movable Field Hospital with an Army Corps on Active Service.
VIII.—Stationary Field Hospital for an Army Corps on Active Service.
IX.—Medical Staff on the Line of Communications and at the base of operations.
X.—Hospital Ships for an Army Corps.

I.—FIELD HOSPITALS.

286. Field Hospitals attached to and moving with troops whether at home during Summer Manœuvres or Mobilization of Army Corps or with a force on active service, will be non-dieted. (See Regulations for Non-dieted Hospitals, Part 2, Section IV. and Regulations for Hospital Diets, Part 2, Section VII.) Field hospitals with troops at home.

287. Field Hospitals attached to and moving with troops at home during Manœuvres or Mobilization of Army Corps, or attached to a force on active service will be furnished with bell tents only (double circular, without lining) and with a light equipment of bedding and clothing. To be provided with tents.

288. Hospitals at the base of operations will, under all circumstances of service, be dieted. See paragraph 474 of these Regulations. How dieted.

289. Field Hospitals at the base of operations, either at home or abroad, on active service will be provided with hospital marquees (when huts or buildings are not available) and with a complete equipment of everything necessary for the care and treatment of sick and wounded. Hospital marquees.

II.—FIELD SERVICE.

290. Medical Officers will be employed with troops in the field.

(*a*) At home during Summer Manœuvres or with mobilized Army Corps.

(*b*) With Army Corps on active service.

III.—SUMMER MANŒUVRES.

Detail of Medical Officers, Army Hospital Corps Establishments, and Hospitals for Summer Manœuvres.

Detail of Medical Officers.

291. The following is the detail of Medical Officers, Army Hospital Corps Establishments, and of hospital arrangements and equipments for a Division during Summer Manœuvres:—

One Principal Medical Officer, who will also act as a Sanitary Officer.
One Medical Officer in charge of Divisional Staff.
One Executive Medical Officer for each Brigade, who will be at head-quarters of the brigade, will have charge of brigade staff, and be available for military duty of the brigade.
Three Medical Officers for each of the Brigade Field Hospital. The senior to have charge of hospital and to act as Senior and Sanitary Medical Officer of the Brigade.
One Army Hospital Corps Officer as Quarter-Master, for duty with the Principal Medical Officer. This officer will draw the equipment of all kinds on requisition, on the authority of the Principal Medical Officer, and give the necessary receipts for the same, handing it over to the senior non-commissioned officer of the Army Hospital Corps attached to each Brigade Field Hospital. The Medical Officer in charge of the Hospital will satisfy himself that the equipment is according to regulations.
One Sergeant-Clerk, Army Hospital Corps.

2. Detail of Personnel, Equipment, and Camp Equipage for a Brigade Field Hospital.

Details.

292. The following is the detail of Personnel, Equipment and Camp Equipage for a Brigade Field Hospital:—

(*a.*) *Personnel.*

Medical Officers.

293. Three Medical Officers; the senior will have charge and act as Senior and Sanitary Officer of Brigade.

Army Hospital Corps Establishment.

One sergeant.
One 2nd corporal.
Three privates.

SUMMER MANŒUVRES—continued.

(b.) Equipment.

12 double circular tents without lining.
2 latrine screens.
50 waterproof sheets.
50 blankets, general service.
A and B canteens (new pattern).
Medical comfort boxes, Nos. 1 and 2 (divisional).
1 flag, field, HP (white, red cross, 4 feet square).
1 lantern, red coloured, marquee, hospital.
2 lanterns, hand, small F and H.
3 spades.
2 pickaxes.
1 chopper.
2 pails, water, wood.
1 pair field panniers complete, with a full set of capital instruments, and 1 admission and discharge book. W. O. Book, No. 27.
3 field companions.
1 box field splints.

(c.) Camp Equipage.

2 bell tents for Medical Officers.
1 do. do. for inspecting men reported sick.
1 do. do. for senior non-commissioned officer, surgery, and stores.
1 do. do. for hospital attendants and servants.
2 camp kettles.

(d.) Wheeled Carriages, &c.

	Horses
One General Service Wagon	4
Three Ambulance Wagons with six stretchers each	6
One Water Cart..	2
Total Horses	12

Medical Officers of the Household Troops, Yeomanry, and Volunteer Corps.

294. Medical Officers of the Household Troops, and those of Yeomanry and of Volunteer Corps, will remain with their Regiments.

SUMMER MANŒUVRES—continued.

Militia Medical Officers.

295. Militia Medical Officers attending manœuvres will be for general duty under the orders of the Principal Medical Officer, and will be employed either with a regiment or with a Brigade Field Hospital, as may be necessary.

Position of a Brigade Field Hospital.

Position of hospital.

296. The Brigade Field Hospital will be placed in rear of the centre of the brigade. On the line of march, the Brigade Field Hospital will follow in rear of its brigade and in front of all baggage.

Soldiers reported sick.

297. Soldiers of the brigade reported sick will be taken at once to the Brigade Field Hospital without any intermediate inspection, bringing the usual company sick report, which will be returned to the Commanding Officer of the Regiment after the men have been inspected by the Medical Officer of the Brigade Field Hospital.

Soldiers reported sick.

298. Sick Soldiers will not be retained in Camp under any circumstances longer than twenty-four hours, but will be sent daily by ambulance wagons or railway to the nearest Field or Station Hospital.

Soldiers reported sick.

299. When sick are sent to the Field or Station Hospitals intimation will be sent on W. O. Form 986 by the Medical Officer in charge of the Brigade Hospital to the Commanding Officer of each Regiment or Corps.

Nominal roll when sent by ambulance wagons.

300. If sent by ambulance wagons a nominal roll will be prepared, stating Regimental number and the name of each man and his disease. This will be signed by the Medical Officer in charge of the Brigade Hospital, and sent with the men.

Railway warrants.

301. If sent by railway the nominal roll will be sent with the party; the railway warrant will be handed to the Station master by the Medical Officer or Non-commissioned Officer in charge. Application should be made for a book of warrants to the War Office.

Stationary Field Hospitals.

Stationary Field hospitals.

302. In the event of the Summer Manœuvres being held in localities too distant from the line of railway to admit of the sick being sent daily from the Brigade Field Hospitals to the Station Hospitals, Stationary Field Hospitals will be formed and placed in the most convenient positions, and will be for the reception of sick from the Brigade Hospitals until they can be conveyed to Station or Base Hospitals.

Detail.

303. The following is a detail of a Stationary Field Hospital:—

SUMMER MANŒUVRES—continued.

(a.) Personnel.

Medical Officers.

3 medical officers,

Army Hospital Corps.

1 officer of orderlies.
2 non-commissioned officers.
1 cook.
6 privates.

(b.) Equipment.

3 hospital marquees.
*9 bundles bedding.
6 ordinary bell tents.
2 office tables.
2 chairs.
2 medical comfort boxes (divisional size).
A and B canteens (new pattern).
2 camp kettles.
1 pair field panniers, complete, with admission and discharge book, W.O. book, No. 27, and instruments.
1 field fracture box.
2 latrine screens.
2 pickaxes.
4 spades.
1 flag, field hospital (white, red cross, 4 feet square).
4 flags, field hospital, directing.
1 axe, felling, 4½ lb., straight handle, helved.
1 red lantern, coloured, marquee hospital.
3 lanterns, hand, small Fd. H.
1 cooking screen.
2 saws (hand) 26 inches.
6 reaping hooks.
9 buckets, iron, galvanized, 4 gallons.

(c). Camp Equipment.

2 bell tents for medical officers.

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* A bundle of bedding contains the following articles :—

Blankets, general service	10
Cases, paillasse, barrack	5
„ bolster, barrack	5
Bed covers, waterproof	5
Cholera belts.	5

SUMMER MANŒUVRES—continued.

1 ditto for officer of orderlies.
1 ditto for inspecting sick, and as an office.
1 ditto for senior non-commissioned officers and stores.
1 ditto for second non-commissioned officers and privates, A.H.C.
1 latrine screen.

(*d.*) *Wheeled Carriages.*

	Horses.
2 general service wagons	8
3 ambulance wagons, with 6 stretchers each	6
1 water cart	2
Total horses	16

IV.—MOBILIZATION.

Mobilization of an Army Corps for Service at Home.

Principal Medical Officer of district, also of Army Corps.

304. The principal Medical Officer of a District to which an Army Corps belongs will, *ex-officio*, be Principal Medical Officer of the mobilized Corps; and on the order for mobilization being issued will at once put himself in communication with the General Officer appointed to command it, and with the local heads of Departments.

Principal Medical Officer of district, also of Army Corps.

305. In the absence of instructions from the Director General of the Army Medical Department, he will appoint the Senior Medical Officers in his District as Principal Medical Officers of Divisions, and the Executive Medical Officers to the charge of Brigade Field Hospitals, and will make use of Militia Medical Officers in whatever manner the exigencies of the service may require.

Civil practitioner.

306. When necessary he will recommend to the Officer Commanding Civil Medical Practitioners for taking charge of Station or Base Hospitals at contract rates.

Detail.

307. The following is a detail of Cadre of Medical Officers and Army Hospital Corps for a Mobilized Army Corps:—

(*a.*) *Medical Officers.*

1 Principal Medical Officer.
3 Principal Medical Officers of Divisions, who will also act as Sanitary Officers of Division.
1 Medical Officer Secretary to Principal Medical Officer.
11 Executive Medical Officers for military duty with Brigades, and to take charge of Brigade Staff.

MOBILIZATION—continued.

33 Medical Officers for 11 Brigade Field Hospitals—3 for each Hospital. The Senior to have charge of the Hospital, and to act as Senior and Sanitary Officer of the Brigade.

(*b*) *Army Hospital Corps.*

1 Officer Army Hospital Corps to act under Principal Medical Officer.
1 Officer Army Hospital Corps as Quarter-Master with each Principal Medical Officer of Division.
1 Serjeant } As clerks to Principal Medical Officer of
1 Private } Army Corps.
3 Serjeants, clerks to Principal Medical Officers of Division.
3 Serjeants, clerks for Officer of Orderlies of Divisions.
11 Serjeants } 1 Serjeant, 1 2nd Corporal, and 3
11 2nd Corporals } Privates to each Brigade Field
33 Privates } Hospital.

308. The Principal Medical Officer will, as far as possible, equip his Corps with medical and surgical appliances from the stores at his disposal, and for all further supplies apply at once to the Director General of the Army Medical Department, who will direct the supplies to be forwarded to the Principal Medical Officer for distribution. Medical equipment of Army Corps.

309. The Principal Medical Officer will ascertain, from personal inspection, that arrangements are made at the different base hospitals herein detailed for the reception of the sick; and where accommodation is insufficient will apply for marquees or barrack buildings to supplement the hospitals. Accommodation of sick.

310. Brigade Field Hospitals and Stationary Field Hospitals will be formed and attached to brigades in the same manner as detailed for manœuvres. The same equipment and transport will also be supplied. See Section III, "Summer Manœuvres." Brigade and stationary field hospitals.

311. The same arrangements with regard to sick will be followed; but the sick will invariably be sent to the General and Station Hospitals of the District to which the Corps belongs, every advantage being taken of the different lines of railway for this purpose. The details of Hospitals to be used by Brigades and Divisions during mobilization, are as follows:— Hospitals to be used during mobilization.

Section VI. Field Hospitals and Hospital Ships.

MOBILIZATION—continued.

Detail of Hospitals to be used by Brigades and Divisions during Mobilization.

I. ARMY CORPS.—COLCHESTER DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be sent to.
Cavalry Brigade ..	Maldon	.. .. ..	Station Hospital, Colchester.
1st Division ..	Colchester ..	1st and 2nd Infantry Brigades and Divisional Troops	Station Hospital, Colchester.
2nd Division ..	Chelmsford ..	1st and 2nd Infantry Brigades and Divisional Troops	Station Hospital, Warley.
3rd Division ..	Gravesend and Chatham	1st Brigade and Divisional Troops 2nd Brigade	Station Hospital, Gravesend. Station Hospital, Chatham.
Corps Artillery ..	Colchester ..	.. .. ..	Station Hospital, Colchester.
Corps Engineer ..	Colchester ..	.. .. ..	Station Hospital, Colchester.

II. ARMY CORPS.—ALDERSHOT DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be sent to.
Cavalry Brigade ..	Lewes	.. .. ..	Station Hospital, Brighton.
1st Division ..	Aldershot ..	1st and 2nd Brigades and Divisional Troops	No. 1 Station Hospital, Aldershot.
2nd Division ..	Guildford ..	1st and 2nd Brigades and Divisional Troops	No. 2 Station Hospital, Aldershot.
3rd Division ..	Dorking.. ..	1st and 2nd Brigades and Divisional Troops	No. 3 Station Hospital, Aldershot.
Corps Artillery ..	Aldershot ..	.. .. ..	Station Hospital, Aldershot.
Corps Engineer ..	Aldershot ..	.. .. ..	Station Hospital, Aldershot.

MOBILIZATION—continued.

III. ARMY CORPS.—CROYDON DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.
Cavalry Brigade ..	Ashford.. ..	.. .. ..	Station Hospital, Canterbury.
1st Division ..	London and Croydon	1st Brigade and 2nd Brigade	Guards' Hospital, London.
	Croydon ..	Divisional Troops ..	Herbert Hospital, Woolwich.
2nd Division ..	Redhill	1st and 2nd Brigades and Divisional Troops	Stationary Field Hospital, Redhill.
3rd Division ..	Tunbridge Wells	1st Brigade and Divisional Troops ..	Station Hospital, Maidstone.
	Maidstone ..	2nd Brigade	Station Hospital, Maidstone.
Corps Artillery ..	Croydon ..	.. .. ..	Herbert Hospital, Woolwich.

IV. ARMY CORPS.—DUBLIN DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.
Cavalry Brigade ..	Curragh.. ..	.. .. ..	No. 1 Station Hospital, Curragh.
1st Division ..	Dublin	1st Brigade and Divisional Troops	Station Hospital, Dublin.
	Belfast	2nd Brigade	Station Hospital, Belfast.
2nd Division ..	Curragh.. ..	1st and 2nd Brigades and Divisional Troops	Nos. 1 and 2 Station Hospitals, Curragh.
3rd Division ..	Cork	1st Brigade and Divisional Troops	Station Hospital, Cork.
	Limerick ..	2nd Brigade	Station Hospital, Limerick.
Corps Artillery ..	Dublin	.. .. ..	Station Hospital, Dublin.

Section VI. Field Hospitals and Hospital Ships.

MOBILIZATION—continued.

V. ARMY CORPS.—SALISBURY DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.
Cavalry Brigade ..	Yeovil	.. .. ..	Station Hospital, Dorchester.
1st Division ..	Salisbury ..	1st and 2nd Brigades and Divisional Troops	General Hospital, Netley.
2nd Division ..	Warminster ..	1st and 2nd Brigades and Divisional Troops	Station Hospitals at Devizes and Bristol.
3rd Division ..	Gloucester ..	1st and 2nd Brigades and Divisional Troops	Stationary Field Hospital Gloucester.

VI. ARMY CORPS.—CHESTER DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.
Cavalry Brigade ..	Crewe	.. .. ..	Station Hospital, Chester.
1st Division ..	Chester	1st and 2nd Brigades and Divisional Troops	Station Hospital, Chester.
2nd Division ..	Liverpool ..	1st and 2nd Brigades and Divisional Troops	Station Hospitals at Rupert House and North Fort, Liverpool.
3rd Division ..	Manchester ..	1st Brigade and Divisional Troops	Station Hospitals, Hulme and Salford, Manchester.
	Preston	2nd Brigade	Station Hospital, Preston.

MOBILIZATION—continued.

VII. ARMY CORPS.—YORK DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.
Cavalry Brigade ..	Doncaster ..	.. .. ..	Station Hospital, Doncaster.
1st Division ..	York	1st and 2nd Brigades and Divisional Troops	Station Hospital, York.
2nd Division ..	Northampton ..	1st and 2nd Brigades and Divisional Troops	Station Hospitals, Northampton and Bedford.
3rd Division ..	Darlington ..	1st Brigade and Divisional Troops.	Stationary Field Hospital, Darlington.
	Newcastle ..	2nd Brigade	Station Hospital, Newcastle.

VIII. ARMY CORPS.—EDINBURGH DISTRICT.

Division, &c.	Station of Assembly.	Detail.	Sick to be Sent to.
Cavalry Brigade ..	Musselburgh ..	.. .. ..	Station Hospital, Piershill, Edinburgh.
1st Division ..	Edinburgh ..	1st and 2nd Brigades and Divisional Troops	Station Hospital, The Castle, Edinburgh.
2nd Division ..	Glasgow ..	1st Brigade and Divisional Troops.	Station Hospitals, Glasgow and Paisley.
	Hamilton ..	2nd Brigade	Station Hospitals, Hamilton.
3rd Division ..	Melrose.. ..	1st and 2nd Brigade and Divisional Troops	Stationary Field Hospital, Melrose.

V.—DUTIES OF MEDICAL OFFICERS ATTACHED TO AN ARMY CORPS IN THE FIELD ON ACTIVE SERVICE.

Duties of the Administrative Medical Staff.

Surgeon General-in-Chief.

312. On the Staff of a General Officer commanding an army there will be one Surgeon General-in-Chief, whose duties will be on the Staff of the General Officer Commanding the Army, and who will have the supreme control under that Officer of all Medical arrangements connected with the force. (See Appendix No. 9, page 194.)

Arrangements by Surgeon General of Army Corps.

313. All Medical arrangements for an Army Corps, the strength of which on active service will be 36,805 of all ranks, will be made by the Surgeon General, and carried out with the approval and under the orders of the General Officer commanding. The detail of the Administrative Medical Staff for Stationary Field Hospitals is shown in Appendix No. 8, page 192.

Surgeon General at head-quarters of Army Corps.

314. The Surgeon General of an Army Corps will remain with the head-quarters of the corps; and will advise the General Officer commanding regarding the disposition and movements of the Bearer Companies and the moveable Field Hospitals.

Communicates with heads of departments.

315. He will place himself in communication with the heads of departments, and intimate to each department concerned the equipment and supplies that will be probably required for the sick and wounded.

Sanitary.

316. He will direct all medical and sanitary matters, on the line of march, in camp and in quarters.

Distribution.

317. He will be responsible for the distribution of Medical Officers, of Officers and men of the Army Hospital Corps, of the reserve, and of civilians employed with the department.

Bearer Companies, and Field Hospitals.

318. He will be responsible for the disposal of such Bearer Companies and Field Hospitals as may not be required for immediate duty.

Dressing station.

319. He will indicate the positions for dressing stations when an engagement is expected.

Bearer Companies and Field Hospitals with division.

320. The Bearer Companies and Field Hospitals attached to a division will be under the command of the General Officer commanding the Division; but the Principal Medical Officer of the Division, in the absence of the Surgeon-General of the Army-Corps, will be responsible for the movements and proper disposal of them at all times.

Principal Medical Officer of division.

321. When a division is detached so as to render communication with the head-quarters of the Army Corps impracticable, the Principal Medical Officer of the Division will perform all the duties of the Surgeon General of an Army Corps in respect to the division.

Field Director.

322. The Field Director will receive his instructions from the Surgeon General of the Army Corps.

His duties.

323. He will regulate all the details of the movements of the Field Hospitals.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

324. He will visit them frequently and, with the surgeon in charge, examine the cases received from Corps, and from the dressing stations of the bearer companies, with a view to the disposal of sick and wounded, so as to obviate overcrowding, by removing with all possible despatch to Hospitals along line of communication or at the base (should their state permit), patients who are not likely to become effective within a reasonable time. His duties.

325. He will report to the Surgeon-General of the Army Corps any deficiencies in clothing, medical and surgical appliances, or any conditions likely to affect the health of the sick or wounded in hospital, so that immediate steps may be taken to supply deficiences, or make necessary arrangements. To report Deficiencies,

326. He will report to the Surgeon General when any buildings are available for hospital purposes. and Buildings available for Hospitals.

327. He will always when possible confer with the Principal Medical Officers of Divisions, before submitting any reports to the Surgeon General of the Army Corps. To consult Medical Officers of Divisions and Surgeon-General of line of communications.

328. When necessary he will communicate directly with the Surgeon General of the line of communications; so that there may be no delay in supplies being forwarded or proper steps taken for the transfer of the sick and wounded from the moveable field hospitals, and will report as soon as possible to the Surgeon General of the Army Corps what arrangements have been made.

329. The duties of the Sanitary Officer at Head-Quarters will be found in the Sanitary Regulations. Duties of Sanitary Officer at Head Quarters.

Medical Officers doing duty with Corps.

330. Medical Officers doing duty with Corps will afford such temporary assistance as may be required in camp, on the line of march, and in action; all cases of sickness occurring in camp, and requiring prolonged treatment, will be sent to the nearest Field Hospital. Medical Officers doing duty with Corps.

331. The cadre of Medical Officers who will do duty with Corps is shown in Appendix No. 10, page 196.

332. Two men a company, trained as stretcher-bearers, will be under the orders of Medical Officers doing duty with Corps, and in cases of outpost duty or detached battalions will perform the duties that are performed divisionally by the men of the bearer company; in extensive actions they will also assist the wounded. It is desirable that Commanding Officers of Regiments should cause four men a company to be trained to meet casualties. Two men per company, trained as stretcher bearers.

333. The regimental stretcher-bearers will never be removed from battalions without the special sanction of the General Officer commanding the division. Not to be removed.

334. Under ordinary circumstances, field companions, in the proportion of two for each regiment, and water-bottles, in the proportion of two for each company, will be carried by the regimen- Regimental medical equipment.

DUTIES OF MEDICAL OFFICERS, &c.—continued.

tal bearers. When the battalions are detached, or whenever it is considered necessary by the Principal Medical Officer of Division, he will cause additional medical supplies or assistance to be furnished.

Regimental stretcher bearers during an action.

335. A field-stretcher for each company will be carried on the line of march in the battalion company carts. When an action is expected, the regimental bearers will leave their rifles and valises in the carts, and march with the stretchers, water bottles, and field companions under the direction of the Medical Officers to the scene of action.

336. In minor actions, Medical Officers doing duty with the regiments engaged will be assisted by surgeons of Corps which are not engaged in applying first dressings to wounded.

Medical Officers with corps to afford temporary aid.

337. In serious actions, Medical Officers doing duty with Corps will only afford such temporary aid to the wounded as may be necessary until the staff of the Bearer Company arrives; on such occasions they will not, as a rule, undertake any serious surgical operation, but always keep in close proximity to their respective Corps.

VI.—THE BEARER COLUMN OF AN ARMY CORPS.

Bearer Column.

338. The duties of a Bearer Column will be to render first assistance to the wounded. and remove them from the field to dressing stations and Field Hospitals. A Bearer Column will consist of four companies, one for each division, and one for the Corps troops, including the cavalry brigade.

Bearer Company for mountain warfare.

339. When operations are being carried out in a mountainous district, an appropriate mountain equipment will replace the carriages, draught horses, and matériel of one of the four Bearer Companies with an Army Corps.

340. The details of a Bearer Company and of the mountain equipment are given in Appendix No. 5, pages 186–188.

Bearer Company divisible.

341. A Bearer Company is divisible into two half-companies, each of which, by the arrangements made for distribution of personnel and stores, is capable of acting independently.

342. When a Bearer Company is divided, the Medical Officer next in rank to the Medical Officer in charge will command the half-company which is detached.

343. The half-company of a Bearer Company will rejoin the head-quarters of the Company as soon as possible after the duties for which it has been detached have been completed.

Two lines of ambulance wagons.

344. There will be two lines of ambulance wagons belonging to each Bearer Company, 10 in the first line and 23 in the second line; the first line of ambulance wagons will, under all circumstances, be kept up to its full strength by supply from the second line.

Ambulance wagons, first line.

345. The ambulance wagons of the first line, and the surgical

BEARER COLUMN, &c.—continued.

wagons and carts of a Bearer Company will all be of service pattern.

346. It may be necessary to form the second line of ambulance wagons from local sources, but as no local carriage can be so suitable for wounded men as the regulation ambulance wagons, these should be used if possible, although horsed from local sources. Ambulance wagons, second line.

347. Ambulance wagons in the second line when supplied from local sources will be proportionately increased in number if they are not capable of conveying as many sick or wounded as the regulation ambulance wagons.

348. When such local auxiliary transport for the sick is supplied, the same proportion of Non-commissioned Officers and artificers from the Army Service Corps will be allowed, as if all the ambulance wagons were of the regulation pattern. Auxiliary Transport.

349. The wagons for the Bearer Companies will be supplied by the Ordnance Store Department, the horses, drivers, and artificers by the Army Service Corps, and maintained by the Commissariat Department; but will be under the direction of the Medical Officer in charge as long as they are attached to the Bearer Companies. Supply of wagons, horses, drivers, and artificers for bearer companies.

350. The following will be the order observed by the Bearer Company on the line of march:— Order of March.

At the head of the Company the sick bearers of the Army Hospital Corps will march in fours; the wagons and carts will immediately follow these in column of route, the ambulance wagons leading.

The posts of Officers will be as follows:—Medical Officers in front of the Army Hospital Corps, Officers of Orderlies in rear of the Army Hospital Corps, and the Transport Officer on the directing flank of the store wagons. The Medical Officer in command will move from one part to another as occasion requires his presence for the preservation of order. The rear of the company will be brought up by remounts and spare horses. When the Bearer Company is provided with mountain equipment the pack animals will immediately follow the Army Hospital Corps in half sections.

351. One-fourth of the men composing the Bearer Company will be equipped with water-tins, and the bearer-company-haversack containing bandages, tourniquets, &c. Water tins, &c.

352. Medical Officers will see that the sick bearers keep their water-tins replenished and the haversack supplied with dressing apparatus.

353. The Bearer Company will be under the direct command of the Medical Officer in charge, who will be responsible through Command of Bearer Company.

BEARER COLUMN, &c.—continued.

the Officer commanding the troops to the Principal Medical Officer of division for its efficiency at all times.

Requisition for supplies and equipment.

354. The Medical Officer in charge will cause the Senior Officer of Orderlies to make all the requisitions on the Commissariat, Ordnance Store, and Medical Departments, for such equipment and supplies as may be required for the Bearer Company. The requisitions will be signed by the Officer of Orderlies receiving the supplies and approved of by the Medical Officer in command of the company. The requisitions for equipment will be made out in strict conformity with the arrangement of Stores by sections shown in Appendix No. 11, pages 197–202.

Senior Officer of Orderlies, Army Hospital Corps.

355. The Senior Officer of Orderlies will be responsible for the charge of the medical equipment and stores of the Bearer Company, and will act as Quarter-Master and Paymaster, and will conduct the duties connected with the formation and arrangements of the dressing station, under the orders of the Medical Officer in charge.

Lieutenants, Army Hospital Corps.

356. The Lieutenants of the Army Hospital Corps will be employed during an action in conducting the ambulance wagons to and from dressing stations, and will perform such other duties as the senior Medical Officer present may consider necessary for the welfare of the sick and wounded.

Transport Officer, Army Service Corps.

357. The Transport Officer of the Army Service Corps will command the detachment of his own corps attached to the Bearer Company, but he will carry out all instructions received from the Medical Officer in charge as to the disposition and movements of the store wagons and horses.

Principal Medical Officer, and General Officer Commanding.

358. Before an action commences the Principal Medical Officer of the Division will advise with the General Officer commanding, in regard to the positions where dressing stations will be established.

359. In the absence of the General Officer or other Officer commanding, the Principal Medical Officer of Division will issue the necessary instructions to the Bearer Company.

360. When no orders have been received from the General Officer Commanding, or from the Principal Medical Officer of Division, the Medical Officer in charge of the company will on his own responsibility organize the dressing station or stations, and take such measures as may be necessary for the relief and transport of the sick and wounded.

Dressing stations.

361. Dressing stations will be established, if possible, at points not exposed to fire. If there be suitable buildings near the scene of action they will be utilized, otherwise an operating tent will be pitched under cover, and the Medical Officer in charge of the Bearer Company will issue such directions as he may consider necessary for the organization of the dressing stations, and apportion to each Medical Officer his duties.

362. At the dressing stations the surgical wagons, water carts,

BEARER COLUMN, &c.—continued.

and store wagons will be placed in position under the orders of the Medical Officer in charge.

363. The dressing station will be distinguished during day-time by two Geneva flags, and during the night by two red lanterns. How distinguished.

364. During the action wounded straggling from the field will be attended to at the dressing station, and transferred to the rear with all possible speed. Straggling wounded.

365. At the close of an action two medical officers with the sick bearers, followed by a Lieutenant of the Army Hospital Corps conducting the first lines of ambulance wagons, will advance by the shortest available route, and halt as near as possible to the scene of action. The halting place will be termed the "Collecting Station." The wagons will be drawn up with the horses' heads towards the dressing station. Mode of collecting wounded after action.

366. The bearers will then take the stretchers from the ambulance wagons in the proportion of one stretcher for every four men; two to carry the wounded man and two to act as reliefs or fatigue-men, assisting in placing him on the stretcher and carrying the wounded man's rifle and valise, and, in the absence of the Medical Officer, applying a first dressing if necessary.

367. The sick bearers will be divided into two half-companies—each half company being under the direction of a medical officer; the wings will be further divided into sections of 16 men, each section being under the direction of a Non-commissioned Officer.

368. The bearers thus detailed will patrol the battlefield and its vicinity, examine the fallen, and separate the living from the dead, removing the wounded to the ambulance wagons for conveyance to the dressing station, and returning again immediately with the stretchers to the field.

369. When the ambulance wagons have been loaded they will proceed to the dressing station, each wagon being followed by an attendant—if possible, a Non-commissioned Officer —who will assist in the removal of the wounded from the wagons.

370. Whenever practicable, the wounded will be carried to the dressing station, or even to one of the field hospitals, in the vicinity, without removal from the stretchers.

371. When all the wounded have been removed from the open, the woods and ditches in the neighbourhood will be methodically searched, so that there may be no possibility of any wounded remaining uncared for. Lanterns for searching in the dark form part of the equipment of a surgery wagon. Vicinity of scene of action to be searched.

372. When the wounded, with their rifles and valises, have been deposited at the dressing stations, the stretchers will be cleaned, and the ambulance wagons will at once return to the field. Return of ambulance wagons to the field.

BEARER COLUMN, &c.—continued.

Arms and valises of the wounded.

373. The arms and accoutrements of wounded men will be carried with them in the ambulance wagons to the dressing stations and field hospitals, and will be handed over to a sergeant of the Army Hospital Corps.

374. Before using a wounded man's rifle as a splint, or placing it in an ambulance wagon, the charge must be withdrawn if the weapon be loaded.

Private property of dead and wounded.

375. Officers and Non-commissioned Officers of a Bearer Company will be responsible that the private property of the dead and wounded is not appropriated. A severe punishment will follow any such act of appropriation.

Second line of ambulance wagons.

376. The second line of ambulance wagons will be under the charge of an officer of the Army Hospital Corps, and under ordinary circumstances about half a day's march in rear of the company.

377. When the wounded begin to arrive at the dressing station, the Medical Officer in charge will send an Officer of Orderlies with orders for the 2nd line of ambulance wagons, or as many of them as may be considered necessary, to advance to the dressing station to remove them to the nearest Field Hospital.

Medical establishment left behind.

378. In case of the troops retiring, the Principal Medical Officer of Division, or, in his absence, the Medical Officer in charge of the Bearer Company, will determine what portion of the medical establishment will be left behind.

Surgery wagons.

379. With each Bearer Company there will be two surgery wagons, containing a complete equipment of instruments, surgical appliances, medicines, and medical comforts for the first assistance in the field. The contents, and mode of packing a surgery wagon, are shown in Appendix No. 4, page 175 to 185.

Diagnosis ticket.

380. When the necessary surgical treatment has been afforded at the dressing station, the Medical Officer will attach to the clothes of the wounded man a diagnosis ticket, on which will be specified his regiment, number, rank and name, with the nature of the injury, the treatment, and any precautions required as to transport; all these details will also be written in the "Tally Book."

Plan of an encampment and of a Surgery Wagon.

381. The plan of an encampment for a bearer company and the plan of a Surgery Wagon showing the mode of packing the baskets and boxes, will be found printed in the Appendix, pages 188 and 185.

VII.—MOVABLE FIELD HOSPITAL, WITH AN ARMY CORPS ON ACTIVE SERVICE.

Movable Field Hospital.

382. Movable Field Hospitals will form the second line of medical assistance in the field; they will be an integral portion of the Army Corps, and will receive the sick and wounded from dressing stations and corps.

MOVABLE FIELD HOSPITAL, &c.—continued.

383. There will be twelve movable field hospitals for an Army Corps; two will be attached to each division, six remaining for general disposal. The detail of a field hospital is shown in Appendix No. 6, pages 189 and 190. Each Field Hospital will accommodate 200 sick, and will be divisible into two, each half-field Hospital being complete in personnel and matériel for 100 sick. When a Field Hospital is divided the Surgeon next in rank to the Medical Officer in charge will take the command of the detached portion. The regulation in paragraph 343, for a Bearer Company, will be followed in the case of a Field Hospital placed under similar circumstances. Number of and how divided.

384. Each hospital tent in a movable Field Hospital will accommodate four patients; but the number may be increased or decreased in accordance with the requirements of the sick and wounded. Hospital tent.

385. Only transport for three Field Hospitals of those that are not attached to divisions will be kept up; when necessary, transport for the remaining Hospitals will be supplied on requisition by the Commissariat Department. The Principal Medical Officer of a Division will be responsible that a sufficient number of Field Hospitals are opened. When more than two are required for the Division, he will apply to the Surgeon General through the General Officer commanding the division for such of the unattached field hospitals as may be required. When a Field Hospital of a Division cannot be moved on account of the number of sick and wounded, want of transport, or other circumstances, the Hospital will cease to belong to the Division, and its place will be taken by a reserve Field Hospital detailed for the purpose by the Surgeon General of the Army Corps. Transport of field hospitals not attached to divisions. Additional field hospitals for divisions.

386. The Principal Medical Officer of a Division will advise the General Officer commanding as to the number and position of Field Hospitals that may be considered necessary while in camp. Number and position of Field Hospitals.

387. When no instructions have been received from the head-quarters of a Division, the Medical Officer in charge of a movable Field Hospital will use his discretion in opening it, reporting his reasons for so doing to the General Officer Commanding the Division, who will refer the matter to the Principal Medical Officer.

388. The Medical Officer in charge of a movable Field Hospital will cause the senior officer of orderlies to make all the requisitions on the Commissariat, Ordnance Store, and Medical Departments for such equipment and supplies as may be required. Requisition for stores and equipment.

389. The requisitions will be signed by the Officer of Orderlies receiving the supplies, and approved of by the Medical Officer in command of the Field Hospital. The requisitions for equipment will be made out in strict conformity with the

arrangement of Stores by sections shown in Appendix No. 11, pages 197 to 202.

Sick and wounded to the rear.

390. He will send all sick and wounded to the Hospitals along the line of communication and the base as soon as practicable, only retaining under treatment cases that are likely to be fit for duty within a short period, or those which might suffer by removal.

391. Before an action the movable Field Hospitals will be cleared of any sick or wounded that can be removed to the rear.

Selection of site for a Field Hospital.

392. In selecting a site for a Field Hospital before an action, due precautions will be taken that the position is as close as possible to the first line of assistance, and that there is a practicable road for the ambulances from the front, and a sufficient water supply in the vicinity.

393. Advantage will be taken of any available and suitable buildings in towns and villages for the establishment of these Field Hospitals.

Tents to be used for Hospitals when buildings not available.

394. When there are no buildings available the hospital tents will be pitched, and the pharmacy, store wagons, and water carts drawn up under the direction of the medical officer in charge.

Field Hospital store wagons.

395. There are four Field Hospital store wagons in a movable Field Hospital, each containing the ward equipment, cooking utensils, and medical stores for 50 patients; the contents and mode of packing of these wagons are detailed in Appendix No. 2, pages 142 to 152.

Pharmacy wagons.

396. There are two pharmacy wagons for a field hospital, each containing a complete equipment of instruments, surgical appliances, medicines, means of compounding, and medical comforts. The contents and directions for packing are fully detailed in Appendix No. 3, pages 153 to 174.

Order of march for Field Hospitals.

397. The following will be the order observed in the case of a movable Field Hospital on the line of march:—

The Non-commissioned Officers and men of the Army Hospital Corps will march in front, followed by the pharmacy, field hospital store wagons, water carts, personal equipment wagons, and forage carts, spare horses bringing up the rear.

The posts of Officers will be as follows:—The Medical Officers before the Army Hospital Corps, Officers of Orderlies in the rear of the Army Hospital Corps, the Transport Officer in the directing flank of the wagons. On the line of march the Medical Officer in command will exercise constant supervision over the Field Hospital column.

Plan of encampment.

The plan of an encampment for a movable Field Hospital will be found printed in Appendix 17, page 225.

VIII.—STATIONARY FIELD HOSPITALS FOR AN ARMY ON ACTIVE SERVICE.

398. The third line of medical assistance in the field will consist of stationary field hospitals along the line or lines of communication, and at the base of operations. Third line of assistance.

399. In choosing sites for stationary hospitals, due attention will be paid to the character and elevation of the country, the nature of the soil, the proximity and purity of the water supply, the practicability of drainage, the shelter afforded by wood or high land from cold winds, and care will be taken that the position is easy of access and at a convenient distance from the main road, and, as far as circumstances will admit, in accordance with instructions contained in the sanitary section of the medical regulations. Choosing of sites.

400. If possible these hospitals will be established in buildings or wooden huts at the port of embarkation, and in towns, villages, or farm-houses along the lines of communication. Hospital marquees will be stored at the base of operations, and issued for stationary hospitals when other shelter is not available. Buildings or huts for hospitals. Marquees.

401. In forming stationary field hospitals along the lines of communication, existing lines of railway and roads will be utilized. The hospitals and provision stations will be placed at regular and convenient intervals so as to suit the position of the forces, and the circumstances of the wounded. Provision stations.

402. Stationary field hospitals will have equipment similar to movable field hospitals as regards medical and surgical stores and ward utensils, but double the quantity of hospital clothing will be allowed; they will not be supplied with special wagons or transport. Equipment of these hospitals.

403. In establishing hospitals at the base, or on lines of communication, the Deputy Surgeon Generals concerned will direct an Officer of the Army Hospital Corps to apply to the Commissariat or Ordnance Store Departments for the necessary stores, and to the Royal Engineer Department in the event of the erection of wooden huts or alterations to existing buildings being required, and will keep the Surgeon General of the line of communications informed on all such points. Stores: alteration of buildings, erection of huts.

404. The sick and wounded from the army in front will be transported by the ambulance wagons of the second line as far as the advanced depôt, where other conveyance provided by the Commissariat on the requisition of the Surgeon General of the line of communications, or the Deputy Surgeon General with the Road Commandant will meet and convey them to their destination. Removal of wounded beyond advanced depôt.

405. On no account are the ambulance wagons of the second line to convey sick and wounded beyond the advanced depôt.

406. Before the removal of sick and wounded, care will be taken in the first instance to ascertain through the Road Com- Removal and transport of

STATIONARY FIELD HOSPITAL, &c.—continued.

sick and wounded along line of communication.

mandant when the road will be open and available for their transport; due notice will in all cases be given by the Deputy Surgeon Generals of Division of the removal of sick and wounded from the movable hospitals to the Surgeon General of Army Corps and to the Surgeon General, and to the Inspector General of the line of communications, and the latter will be responsible that intelligence is communicated throughout the whole line and to the Principal Medical Officer at base of operations.

Civilian Surgeons and Medical Students employed during war.

407. Surgeons, medical students, and others rendering voluntary aid as hospital helpers will, under the sanction of the War Office, be employed in stationary hospitals. They will, on arrival at the seat of war, report themselves to the Surgeon General at the base of operations, who will appoint them to vacancies on the Hospital Staff. While thus serving, civilian surgeons and others will act under the military medical officer in charge of each hospital.

IX.—MEDICAL STAFF ON THE LINE OF COMMUNICATIONS AND AT THE BASE OF OPERATIONS.

Surgeon General of lines of communication.

408. There will be one Surgeon General for the line of communications and base of operations.

409. He will carry on the duties of the Department under the orders of the Inspector General of the line of communications, and will be responsible to the Surgeon General in Chief of the Army for Medical arrangements along the line of communications and at the base of operations.

Duties.

410. He will be responsible for the medical administration of all stationary hospitals, both at the base of operations and on the line of communications; also that sufficient supplies of medical and surgical equipment, to meet the requirements of the whole Army, are in store both at the base and at the advanced depôt, and will report all wants and deficiencies to the Director General of the Army Medical Department, informing the General Officer Commanding thereof.

Responsibility for forwarding supplies.

411. He will be responsible for the forwarding of medical and surgical appliances and stores for the hospitals of the whole Army.

Removal and embarkation of sick and wounded.

412. He will be responsible, under the Inspector General of the line of communications, for the removal of all sick and wounded from the advanced depôt to the stationary hospitals on the line of communications or at the base, and also for the embarkation, under the instructions of the Commandant at the base of operations, of sick and wounded to England, or to any convalescent station.

Hospital ships. The Medical equipment.

413. The hospital ships, so far as their medical equipment and readiness for the reception of sick and wounded, will also be under his supervision and control.

MEDICAL STAFF, &c.—continued.

414. Two classes of patients will be transferred from base hospitals to hospital ships: (*a*) Those who are invalided, and awaiting transport to England, or a sanitarium; and (*b*) sick sent on board for change of air, or to obviate overcrowding at the base.

Classes of of patients to be transferred to hospital ships.

Deputy Surgeon General. Field Inspector of the Line of communications.

415. A field Inspector will be appointed for each road of communication, and will carry on his duties under the Road Commandant. He will be responsible to the Surgeon General of the line of communications for all medical arrangements as detailed in the Field Hospital Regulations, Section VI, Sub-section V, and will frequently visit the stationary hospitals on the line of communications, and will, in consultation with the medical officers in charge, decide regarding the patients that may return to duty, and those who are to be invalided, furnishing a report thereof to the Surgeon General.

Field Inspector.

416. He will inform the Surgeon General without delay of any deficiencies in hospital equipment or medical stores that may exist in these hospitals, so that immediate steps may be taken to supply what is needed.

Deficiencies of equipment or stores to be reported.

Base of Operations.

417. There will be three Deputy Surgeon Generals at the base of operations, the senior of whom, acting under the Surgeon General of the line of communications will perform the duties of Principal Medical Officer under the Officer Commanding at the base.

Administrative Medical Officers at base of operations.

418. He will also act as Sanitary Officer, and will be consulted as to the selection of buildings to be used as barracks or hospitals, of sites for camps and camp hospitals at the base, and will be responsible for the medical supervision of the same, and that the equipments and supplies of such hospitals are procured.

Sanitary Officer.

419. The Second Surgeon General will be responsible for the arrangements connected with the reception of sick and wounded from the stationary field hospitals along the line of communications and from the army in front. He will also superintend the embarka- tion of sick and wounded, and will preside over all medical invaliding boards.

Disposal of sick and wounded at base.

420. He will intimate to the General Officer commanding, when it is necessary for invaliding boards to assemble, and will take due precautions that there is no delay in bringing forward officers and men for invaliding, when they are not likely to become effective within a reasonable time.

Invaliding.

421. The Third Surgeon General will be responsible that

Medical and surgical stores.

MEDICAL STAFF, &c.—continued.

there is a sufficiency of medical and surgical stores, and will arrange with the Commissariat Department for the forwarding of the same to the hospitals on the line of communications, and the advanced depôts, for the use of the hospitals and bearer companies with Army Corps.

Advanced Depôts.

Surgeon Major at advanced depôt.

422. One Surgeon Major will be stationed at the advanced depôt, and, acting under the Surgeon General of the line of communications, will have charge of such medical and surgical supplies and appliances as it may be considered necessary to keep there. He will procure, by requisition from the Deputy Surgeon General at the base of operations, these stores, and will be responsible that a sufficient supply is kept at the advanced depôt to meet the urgent requirements of the movable hospitals and bearer companies in front, and will arrange with the Commissariat Department for forwarding them to the hospitals and bearer companies.

X.—HOSPITAL SHIPS FOR AN ARMY CORPS.

Relative responsibility of Admiralty and War Office.

423. The relative responsibility of the Admiralty and War Office with regard to Hospital Ships for an Army Corps, will be as follows.

Admiralty.

424. The Admiralty will undertake the lodging, victualling, and conveyance of the sick, and for that purpose will provide the necessary shipping, fittings, bedding, food, medical comforts, disinfectants, and mess utensils of every kind.

War Office.

425. The War Office will undertake to furnish the medical and other attendance necessary for the proper treatment and nursing of the sick, and the washing of all Hospital clothing and bedding used by them, and will supply all articles of personal and Hospital clothing, medical and surgical appliances, and Hospital utensils.

Floating hospital accommodation.

426. Floating Hospital accommodation, whether stationary or for transport purposes, will be separate and exclusive of the Hospital accommodation for the force on land.

Depôt hospital ships.

427. The following will be the floating Hospital accommodation for an Army Corps. Each division of an Army Corps will have a depôt Hospital Ship (with steam power) capable of making up 200 beds, or 250 on an emergency.

Relieving ships.

428. There will be one or more swift powerful steamers, each making up 60 beds, which will be employed as relieving ships for the depôt Hospital Ships to take the worst cases to England. Despatch vessels, each fitted out with about 30 canvas cots, will carry less severe cases to any available packet station to meet the packets on their way to England.

HOSPITAL SHIPS, &c.—continued.

429. Special arrangements will be made for carrying a small number of invalids in each steam packet.

Arrangements for invalids in steam packets.

430. Each depôt Hospital Ship will have a small steam transport attached as a store ship.

Small steam transports as store ships.

431. Every transport will accommodate temporarily in its sick bay three per cent. of the entire force that it carries.

Sick accommodation on transport ships.

432. Each depôt Hospital Ship will be supplied with 400 canvas cots in addition to the cots required for use on board. These will be fitted into transports remaining at the base of operations when additional Hospital accomodation is required.

Canvas cots for additional hospital accommodation in transports.

433. The dieting of patients on board depôt Hospital Ships and their relieving vessels will be conducted in the same way as in Station Hospitals, and the same War Office Forms will be used. Daily requisitions for articles of diet and medical comforts will be made on the Paymaster, or, if it be a hired ship, on the Master of the vessel.

Dieting on board depôt hospital ships and relieving vessels, W.O. Forms.

434. A statement of provisions received, issued, and remaining, will be completed on W.O. Form 184, at the end of each month, and forwarded to the head-quarters of the Army Medical Department for transmission to the Surveyor General of the Ordnance, War Office, London.

Statement of provisions.

435. Each of these Hospital Ships will be provided with a sufficient staff of the Army Hospital Corps for carrying out the Hospital duties detailed in paragraph 425.

Army Hospital Corps Staff for hospital duties.

436. The regulations for medical officers in charge of troops on board ship [Part 1, Section III, Subsection III] will apply to despatch vessels, transports, and packets used for the temporary accommodation of the sick of the Army Corps.

Regulations for Medical Officers in charge of troops on board ship.

437. When a ship has been taken up by the Admiralty for the conveyance of Troops either as a transport or a Troop freight ship, an Army Medical Officer (if possible the Medical Officer who is to have charge of the Troops) will make a careful inspection of the ship's crew, at the time of the "first inspection" of the vessel; and will immediately inform the Naval Inspecting Officer of the result, reporting the same to the Principal Medical Officer.

Transport ships.

438. The Medical Officer in charge of Troops on board Transports and Troop Freight Ships will take medical charge of the ship's crew also, when the ship does not carry a Surgeon, and will supply medicines, &c., for their use from the public stock on board; he will have a general sanitary supervision over the ship, and will make inspections of the quarters occupied both by the Troops and by the crew.

Medical Officers in charge of troops on board transport ships to take care of the crews.

439. The following is the detail of the medical equipment which will be put on board a Transport for the use of Troops and crew:—

Medical equipment on board Transports.

One Medicine Chest, complete.

One case of Surgeon's Instruments.
One case of Tooth Instruments.
One Stomach Pump.
One box of Fracture Apparatus.

440. This equipment will be put on board and handed over to the Medical Officer in charge, who will give a receipt for the same to the Principal Medical Officer at the port of embarkation.

Equipment on board Transports to the left in charge of the Master.

441. In the event of the Medical Officer landing with the Troops when Transports are employed during military operations, the equipment will be left on board the ship, under the charge of the master, who will give a receipt to the Medical Officer, specifying the number of articles, not quantities, contained in each. The Master will be furnished with a duplicate thereof countersigned by the Medical Officer.

442. The equipment will be handed over again to the first Medical Officer who embarks for duty on board, and who will furnish the master with a receipt for the same.

SECTION VII.—REGULATIONS AS TO HOSPITAL DIETS.

443. The dietary, as set forth in the diet table, printed in the Appendix No. 12, page 203, [W. O. Form 147,] will be used in all dieted Hospitals. General and station hospitals' dietary.

444. All articles issued for Hospital purposes are exclusively for the use of the sick. They will not, at any time or under any circumstances, be applied to any other purpose, or used in any place not actually connected with or set apart for the treatment of the sick.

445. A copy of the diet table will be hung up in a conspicuous place in every ward of the Hospital.

446. The following extras are authorised and may be given on all diets except entire and varied, when necessary for the treatment of the case, viz., eggs, milk, tea, beef-tea, arrowroot, sago, oatmeal, rice-pudding, sago-pudding, the customary fruits in season, wines, spirits and malt liquors; the following are also authorised on all diets, including entire and varied, when requisite, viz., barley-water, rice-water, gruel, and lemonade. Extras allowed.

447. Eight ounces of white fish, with 2 oz. of butter, may be ordered on milk, low, and half diets.

448. Eight ounces of potatoes, or 4 oz. of vegetables, will be admissible as an extra on low diet, when it is found necessary to keep a patient on this diet for any lengthened period, or when there is a tendency to a scorbutic taint.

449. The only extras allowed on entire and varied diets are wines, spirits, malt liquors, and the diet drinks specified in paragraph 446.

450. When rice or sago-puddings are ordered, they will be made with the following ingredients:— Rice and sago puddings.

Rice Pudding.		Sago Pudding.	
Rice -	- 2 oz.	Sago -	- 1½ oz.
Milk -	- ¾ pint.	Milk -	- ⅔ pint.
Sugar	- ½ oz.	Sugar-	- ½ oz.
Egg -	- 1.	Egg -	- 1.
Flavoured with cinnamon or lemon.		Flavoured with cinnamon.	

451. Oatmeal, arrowroot, and sago, when ordered, are not to exceed the following proportions:— Oatmeal, arrowroot and sago.

HOSPITAL DIETS—continued.

Oatmeal -	- 4 oz.,	with milk -	8 oz.
Arrowroot	- 2 „	„ sugar -	1 „
Sago -	- 2 „	„ „ -	1 „

Wines include sherry, port, and claret.
Malt liquor includes porter and ale.
Spirits include brandy, whisky, and gin.

Drinks.

452. The composition and proportion of the drinks are stated on W. O. Form 147, but when fresh lemons cannot be procured lemonade may be made with lime-juice, in the proportion of 2 oz. of the lime-juice to one pint of the beverage.

Soda water.

453. Under very special circumstances, soda water, bottled lemonade, and calfs-foot jelly may be given, but only when the issue is approved of by the Principal Medical Officer, or in his absence the senior Medical Officer in the command.

Quality of beef, mutton, and chicken.

454. The beef and mutton for the various diets, as also the fowls, are to be of good quality, and must weigh in the raw state exclusive of bone, the weight specified in the Diet Table; one fourth more will be considered an equivalent when meat is issued with bone.

Bread.

455. The bread is also to be of the best household kind.

Beef tea.

456. The meat on low diet is to be used for beef tea, so as to make three quarters of a pint of good beef tea for each patient on such diet.

Soups and seasoning.

457. The meat on half and entire diets, is to be boiled with the vegetables, barley and flour; and a ¼-oz. of sugar, for each soup diet, may be charged in addition to the allowance on the scale. The meat on entire diets is to be roasted, baked, or stewed. For varied diets mustard may also be issued in the proportion of 1 oz. for every 20 diets; pepper for seasoning will be allowed at the rate of 2 oz. for every 100 diets of all kinds excepting Tea and Milk.

Vegetables.

458. In the diets, when no soup is given, the vegetables are to be cooked in bulk, and served up to each patient in the proportions specified.

Substitutes for potatoes.

459. When potatoes cannot be procured of a sufficiently good quality, either 3 ozs. of rice, 3 ozs. of flour, or 8 ozs. of bread, may be issued in lieu of 16 ozs. of potatoes.

460. Preserved potatoes, when issued, will be in the proportion of 1 oz. of the preserved to 5 ozs. of fresh, and 1 oz. of mixed preserved vegetables in lieu of 10 ozs. of fresh.

Coffee.

461. Half an ounce of Coffee may be substituted for ⅛ oz. of tea at breakfast and supper.

Milk, wine and spirits.

462. Milk, Wines, and Spirits are to be calculated at 20 oz. the imperial pint. The reputed quart bottle should contain 5⅓ gills or 26⅔ oz.

Extras for patients not on regular diet.

463. When men, on admission to Hospital, require nourishment before they are placed on regular diet, Medical Officers may order what is necessary from the following extras :—

HOSPITAL DIETS—continued.

Bread, butter, tea, sugar, eggs, essence of beef, arrowroot, milk, wines, and spirits;

and on the departure of invalids who are not on diet, a similar course may be adopted, but in all such cases the extras will be entered on the diet sheet.

Diet Sheets and recording of diets.

464. Previous to the issue of any diets, extras, or drinks, they will be entered on the diet sheet W.O. Form 1145. This will be filled up daily by the prescribing Medical Officer, ordinary diets for the following day, extras and drinks for the day of issue. The first entry of each man's diet will be written in words, and subsequent entries of the same diet will be indicated by the initial letter of the diet, which will be marked in the proper column from day to day by the prescribing Medical Officer, who will at the same time obliterate the colums in which no entries have been made by drawing a line through each unoccupied space. The date of discharge will invariably be filled in by the prescribing Medical Officer, who will also sign the sheet when completed. The diet sheet will be hung up at the head of the patient's bed.

465. The names of all men on Hospital diet, or to whom extras have been given, will be duly entered in the Hospital Admission and Discharge Book (W.O. B. 27), and a record kept of the number of days on Diet, or Hospital comforts, for completion at the end of each month of W.O. Form 152 to enable the regulated stoppages applicable to each case to be recovered.

Forms to be rendered.

466. A Monthly Abstract of Diets and Extras (W.O. Form 175), and a Monthly Statement of Provisions, &c., received, expended, and remaining (W.O. Form 184) will be sent at the end of each month to the Commissariat Officer or his representative at the Station, who will ascertain the correctness of the computation of both Forms, and see that they are duly certified and agree as regards expenditure. The Diet Sheets (W.O. Form 1145) and Extra Sheets (W.O. Form 1200) will, at the end of each month, be sent by the Medical Officer in charge direct to the Principal Medical Officer of the District. (*See* par. 191.)

Economy in ordering extras.

467. Medical Officers must always bear in mind that, although no instructions can be laid down in regulations as to the character of cases needing extras, the necessary economy, compatible with the well-being of the patient, should be practised, in order that an undue or injudicious issue of extras may be avoided.

Cases to be recorded.

468. Every case in which extras have been prescribed will be entered by the prescribing Medical Officer in the Medical Case Book, and the daily amount of extras recorded, so that the Principal Medical Officer may be enabled to satisfy himself as to the necessity of the issue.

469. Prescribing Medical Officers will be held directly responsible to the Principal Medical Officer for all entries on their

INSTRUMENTS, &c.—continued.

Eye Instruments.
Eye Douches, No. 3.
Electro Magnetic Machines, No. 2.
Ether Inhaler.
Ecrasseur.
Fractured Patella Apparatus.
Fractured Jaw Apparatus.
Forceps Polypus.
Fistula Director.
Hæmorrhoidal Clamp, with three buttons.
Ice Bags, set 1.
Irrigators, sets two.
Microscope.
Ophthalmoscope and Laryngoscope, in case.
Spray Producer.
Sounds, case of.
Spectacles, case of.
Speculum Auris.
Speculum Recti..
Tonsil Guillotine.
Tourniquet Abdominal.
Tooth Stopping and Scaling Instruments.
Urethra Dilator, Holt's.
Urinometer Apparatus, *large.*
Varicocele Rings and Needles.
Water Beds, No. 2.
Water Pillows, No. 2.

481. The Instruments and Appliances will be placed under the charge of the Principal Medical Officer, who will be responsible that they are in safe custody and kept in good order, and they will be issued on loan by requisition on the Principal Medical Officer, to whom they will be returned when no longer required.

482. The Principal Medical Officer at Home Stations will forward half-yearly to the Director General Army Medical Department a list of the Instruments and Appliances, stating the condition of each article. From Foreign Stations the list will be sent annually.

Station Hospitals Equipment of Surgical Instruments.

483. At each Station Hospital an equipment of Surgical Instruments, Appliances, and Materials consisting of the articles specified in the following list will be provided :—

INSTRUMENTS, &c.—continued.

Article.	No. 1. 1000 Troops.	No. 2. 500 Troops.	No. 3. 250 Troops.
Arm Sling	..	1	1
Bolus Knives	3	2	1
Brushes, Glass	2	..	..
Corkscrew..	1	1	1
Caustic Holder	1	1	1
Catheters, Elastic Gum, set	1	½	..
Eye Shades	6	2	2
Eye Baths	3	..	..
Field Fracture Case	..	1	1
Fracture and Dislocation Apparatus (box of)	1	..	..
Filter	1	1	1
Hone and Strop	one of each.	..	..
Irrigator	1	1	..
Measuring Tape	1	1	1
Operating Table	1	..	..
Pill Machine	1	1	1
Pins, Safety	one packet.	one packet.	..
Pins, Suture	12	..	..
Post-Mortem Instruments	1	1	1
Pus Basins..	4	2	1
Rods, Glass	3	1	1
Scales and Weights, Pillar	1	1	1
Scissors, Counter	1	1	1
Spatulas, Spreading	1	1	1
Spatulas, Pot	2	1	1
Stethoscopes	2	1	1
Stomach Pump	1	1	1
Surgeon's Case of Instruments	1	1	1
Thermometers, Bath	1	1	..
Tooth Instruments	1	1	1
Urinometer Apparatus	1	1	1
Vapour Bath and Cloak	1	1	..

484. The Medical Officer in charge of the Hospital will be responsible for the safe custody and condition of the foregoing Stores, and requisitions for all repairs, completions, and replacements will be included, as far as practicable, in the half-yearly demands.

485. The Instruments will be kept in the surgery under lock and key; and all other articles either in the surgery or store. These Instruments, Appliances, and Materials will be accounted for half-yearly at Home Stations on W.O. Form 299; annually at Foreign Stations on W.O. Form 828 and 829. The half-yearly Return of General Stores at Home will be made on W.O. Forms 828 and 829.

486. The following Scale of Surgical Materials, &c., is calculated for the use of a Force consisting of 1,000 troops (inclusive of Women and Children) for a period of six months. Requisi-

INSTRUMENTS, &c.—continued.

tions put forward for a greater or smaller number of troops will be made in proportion as nearly as practicable,—viz., for 750, three-quarters; for 500, one-half; and for 250, one-quarter of this Scale.

Syringes, Urethra, Pewter	..	No.	12
„ „ Glass	..	„	6
Surgeon's Sponges	..	„	12
Bandages, Calico	..	„	36
„ Flannel	..	„	8
„ 18 tailed	..	„	4
„ Suspensory	..	„	12
Flannel for Fomentations	..	yds.	6
Gutta-Percha Tissue	..	„	4
Oiled Silk	..	„	1
Spongio Piline	..	„	1
Camel-hair Pencils	..	No.	12
Cotton Wool	..	lbs.	2
Tape	..	piece	1
Thread for Ligatures	..	oz.	2
Needles, common	..	paper	1
Test tubes	..	set	1
„ Paper	..	books	4
Glass Brushes	..	No.	2
„ Rods	..	„	2
Eye Shades	..	„	6

Instruments, &c., for Medical Officers doing duty with Corps.

487. All demands for such articles will be forwarded on W.O. Form 300, in the manner detailed in paragraphs 490 and 501.

488. The Surgical Instruments and Appliances authorized by paragraph 54, will be kept under lock and key in the Instrument and Book box; a return of Instruments and Appliances in charge will be furnished by the Medical Officer to the Principal Medical Officer of the District in manuscript half-yearly, specifying the condition of each Instrument and Appliance.

Instruments, &c., for Medical Officer in charge of troops on board ship.

489. The supply of Instruments and Appliances for Troops embarked coastwise, and proceeding on, or returning from Foreign service (except India) is dealt with in the "Regulations for Medical Officers in charge of troops on board ship." (*See* par. 74).

Instruments, &c., becoming unserviceable.

490. When any Instrument or Surgical Appliance becomes unserviceable or deficient, a Requisition in duplicate on W.O. Form 300, together with a report of the circumstances under which the damage or deficiency occurred, will be transmitted to the Principal Medical Officer, who, if at any Home Station except in Ireland, will through the Director General of the Army Medical Department, take immediate steps for its replacement or repair. At Foreign Stations, the Principal Medical Officer will arrange for replacing all damages and deficiencies, reporting the steps taken in regard thereto, to the Director General.

Transfers.

491. When a Medical Officer is removed from any charge he will transfer all Surgical Instruments and Appliances belonging to the Hospital, to the Medical Officer relieving him, as laid down in paragraph 502 of these Regulations. The condition of each article of surgical equipment will be stated in the Transfer-Return, or the Medical Officer taking over charge will be held responsible for any deficiencies afterwards reported.

Instruments lost or damaged.

492. At Foreign Stations, Medical Officers may procure Instruments at the prices paid for them by the public from the Public Stores, to replace those of the regulation Pocket-Case which may

be lost or become damaged, provided the articles required are on charge at the Station.

493. Steel Trusses, when considered necessary, will be applied for by Requisition in duplicate on W.O. Form 295 At Home Stations, with the exception of Ireland, the requisitions will be forwarded through the Principal Medical Officer of the District to the Director General, and at Foreign Stations they will be forwarded to the Principal Medical Officer for supply from the Army Medical Stores. Steel trusses.

494. Each Truss supplied will be expected to last at least three years, but if, from any unforeseen causes, it should require renewal within a less period, full explanation of the circumstances under which it has become inefficient will invariably accompany the requisition. To last three years.

495. In those Station Hospitals where trusses are authorized to be supplied, a nominal list of the issues made will be appended to the periodical Returns of Medicines and Instruments forwarded to the Director General. Nominal lists of issues of trusses.

496. Commissioned Officers of the Army, and persons employed under Government at Foreign Stations, will, subject to the approval of the Commanding Officer and the Principal Medical Officer, be allowed to purchase from the Public Stores such Steel Trusses as may be required for their personal use, at the prices paid by the Government. The proceeds of these sales will be immediately paid into the military chest and duly reported by the Principal Medical Officer for the information of the Director General of the Army Medical Department, and all such sales will be entered in the Annual Returns rendered to the Army Medical Department, supported by the usual vouchers. Purchase of Trusses by Officers and Departmental employés.

SECTION II.—MEDICINES AND MEDICAL MATERIALS.

e of portions.

497. The following Scale of Medicines and Medical Materials, is calculated for the use of a Force consisting of 1,000 troops (inclusive of Women and Children) for a period of Six Months. Requisitions put forward for a greater or smaller number of troops will be made in proportion as nearly as practicable—viz., for 750, three-quarters; for 500, one-half; and for 250, one-quarter of this scale :—

	lbs.	oz.
Acacia	2	0
„ Pulvis	2	0
Acet: Scillæ	1	0
Acid: Acetic	4	0
„ „ Glaciale	0	2
„ Carbolic:	3	0
„ Citric:	1	8
„ Gallic:	0	4
„ Hydrochlor:	1	8
„ Hydrocyan: dil: ..	0	2
„ Nitric:	1	8
„ Phosphoric: dil: ..	1	0
„ Sulphuric:	2	0
„ Sulphurosum	1	0
„ Tannic:	0	8
„ Tartaric:	3	0
Adeps Benzoat..	3	0
Æther	0	12
Alumen	3	0
Ammonii Chlorid:	2	0
Ammoniæ Carb:	2	0
Amylum	3	0
Antim: Tartarat	0	6
Aqua Destillata..	½ gall.	
Aqua Rosæ	2	0
Argent: Nitras..	0	4
Atropia	10 grs.	
Bismuth: Subnit:	0	4
Borax	2	0
Buchu Folia	0	8
Calumb: Radix	1	0
Camphora	1	8
Capsici Pulv:	0	2
Carbo Ligni	3	0
Catechu	0	2
Cera Alba	0	2
Chirata	1	0
Chloral Hydras	1	0
Chloroform	0	8
„ Methyl	0	12
Cinchon: Flavæ Cortex ..	2	0
Collodium	0	4

	lbs.	oz.
Condy's Disinfectant	4 pints.	
Conf: Rosæ Gall:	0	4
„ Sennæ	1	0
Copaiba..	6	0
Creasotum	0	3
Creta Præparata	2	0
Cubebæ Pulvis..	6	0
Cupri Sulphas	0	8
Dec: Alöes Comp:	2	0
Elaterium	20 grns.	
Emplast: Belladon:	1	0
„ Calefaciens	2	0
„ Cantharid:	4	0
„ Hydrarg:	1	0
„ Opii	1	0
„ Resinæ	1	0
„ Saponis	1	0
Extract: Aconit:	0	1
„ Alöes	0	2
„ Belladon:	0	4
„ Colch: Acet: ..	0	1
„ Coloc: Co:	1	0
„ Conii	0	4
„ Ergotæ Liq: ..	0	2
„ Filicis Liq:	0	4
„ Gentian	0	4
„ Hyoscyam:	0	8
„ Nucis Vomic: ..	0	0½
„ Opii	0	2
„ Sarsæ Liquid: ..	8	0
Extract Taraxici	1	0
Ferri et Ammon: Cit: ..	0	8
„ Quiniæ Cit:	0	12
„ Phosphas	0	4
„ Sulphas	0	8
Ferrum Tartaratum	0	6
Gallæ Pulvis	0	4
Gentiana	2	0
Glycerinum	3	0
Guaiaci Resina..	0	8
Hydrarg: Iodid: Rub: ..	0	2
„ Oxid: Rub: ..	0	4

MEDICINES, &c.—continued.

	lbs.	oz.
Hydrag: Perchlorid:	0	1
„ Subchlorid: ..	1	0
Hydrargyrum cum Creta ..	0	8
Inject: Morph: Hypoderm: ..	0	1
Iodum	0	2
Ipecacuanhæ Pulvis	1	0
Jalapæ Pulvis	1	0
Lini Farina	1½	cwt.
„ Semen	4	0
Liniment: Aconit:	0	4
„ Belladon:	0	8
„ Camphor: Co: ..	5	0
„ Iodi	0	8
„ Saponis	10	0
Liquor: Ammoniæ	2	0
„ „ Acet: Conc:	3	0
„ Arsenicalis	0	4
„ Calcis Sulph:.. ..	8	0
„ Donovani	0	8
„ Epispasticus	0	4
„ Ferri Pernit:.. ..	0	8
„ Opii Sed:	0	6
„ Plumbi Subacet: ..	2	0
„ Potassæ	4	0
„ Sodæ Chlor:	4	0
„ Styptic:	0	8
„ Zinci Chlor:	6	pints.
Magnesiæ Carbonas	2	0
„ Sulphas	56	0
Manganese: Oxid: Nig: ..	3	0
Mel	2	0
Morphiæ Acetas	0	0½
„ Hydrochlor: ..	0	0½
Oleum Anisi	0	0½
„ Cajuputi	0	8
„ Carui	0	0½
„ Caryoph:	0	1
„ Cassiæ	0	0½
„ Crotonis	0	4
„ Lini	4	0
„ Menth: Pip:	0	2
„ Morrhuæ	36	0
„ Olivæ	12	0
„ Ricini	28	0
„ Terebinth:	8	0
Opii Pulvis	0	2
Oxymel Scillæ	2	0
Pareira	0	8
Pepsin	0	1
Pilul: Aloes et Myrrh ..	0	4
„ Assafœtid: Co:	0	2
„ Hydrarg:	1	0
„ „ Sub-Chlor: Co:	0	8
„ Phosphori	0	2
„ Rhei Comp:	0	8
„ Scillæ Comp:	0	4
Plumbi Acetas..	2	0
Podophylli Resina	0	1
Potassii Bromidum	1	0
„ Iodidum	4	0
Potassa Caustica	0	1
„ Sulphurata	2	0

	lbs.	oz.
Potassæ Acetas	2	0
„ Bicarbon	3	0
„ Chloras	2	0
„ Nitras..	3	0
„ Permanganas ..	0	4
„ Tartras	1	0
„ „ Acida ..	4	0
Pulv: Antim: Jacobi	0	2
„ Cretæ Arom:	1	8
„ „ „ cum Opio	1	8
„ Ipecacuanhæ Comp: ..	1	0
„ Jalapæ Comp:	2	0
„ Kino Comp:	0	4
„ Rhei Comp:	2	0
Quassia	2	0
Quiniæ Sulphas	0	8
Rhei Pulvis	0	8
Rosæ Gallicæ Petal	0	8
Santoninum	0	1
Sapo Duras	0	4
Scammonium	0	2
Senega	1	0
Senna	6	0
Sinapis	10	0
„ Charta..	6	boxes.
Soda Tartarata..	6	0
Sodæ Bicarbonas	4	0
„ Carbonas	1	0
Spiritus Ætheris	1	8
„ „ Nitrosi ..	5	0
„ Ammon: Aromat: ..	3	0
„ Chloroformi	2	0
„ Rectificat:	1	pint.
„ „ Methyl: ..	6	pints.
Strychnia	30	grs.
Sulphur	2	0
Syrup: Chloralis	1	0
„ Ferri Iodid:	2	0
„ „ Phosph:.. ..	1	0
„ Papaveris	1	0
„ Scillæ	5	0
„ Triplex	2	0
Tinctura Aconiti	0	8
„ Arnicæ	1	0
„ Assafœtid:	0	8
„ Aurant:	1	0
„ Belladon:	0	4
„ Benzoin: Co: ..	0	8
„ Calumbæ	1	0
„ Camphor: Comp: ..	9	0
„ Cantharid:	0	8
„ Capsici	0	8
„ Cardam: Comp: ..	3	0
„ Catechu	2	0
„ Cinchon: Comp: ..	3	0
„ Colch: Sem:.. ..	1	0
„ Digitalis	0	8
„ Ferri Perchlor ..	4	0
„ Gentian Comp: ..	2	0
„ Guaiaci Ammon: ..	0	8
„ Hyoscyami	3	0
„ Iodi	2	0

SECTION II.—MEDICINES AND MEDICAL MATERIALS.

Scale of proportions.

497. The following Scale of Medicines and Medical Materials, is calculated for the use of a Force consisting of 1,000 troops (inclusive of Women and Children) for a period of Six Months. Requisitions put forward for a greater or smaller number of troops will be made in proportion as nearly as practicable—viz., for 750, three-quarters; for 500, one-half; and for 250, one-quarter of this scale:—

	lbs.	oz.
Acacia	2	0
„ Pulvis	2	0
Acet: Scillæ	1	0
Acid: Acetic	4	0
„ „ Glaciale	0	2
„ Carbolic:	3	0
„ Citric:	1	8
„ Gallic:	0	4
„ Hydrochlor:	1	8
„ Hydrocyan: dil: ..	0	2
„ Nitric:	1	8
„ Phosphoric: dil: ..	1	0
„ Sulphuric:	2	0
„ Sulphurosum	1	0
„ Tannic:	0	8
„ Tartaric:	3	0
Adeps Benzoat..	3	0
Æther	0	12
Alumen	3	0
Ammonii Chlorid:	2	0
Ammoniæ Carb:	2	0
Amylum	3	0
Antim: Tartarat	0	6
Aqua Destillata..	½ gall.	
Aqua Rosæ	2	0
Argent: Nitras..	0	4
Atropia	10 grs.	
Bismuth: Subnit:	0	4
Borax	2	0
Buchu Folia	0	8
Calumb: Radix	1	0
Camphora	1	8
Capsici Pulv:	0	2
Carbo Ligni	3	0
Catechu	0	2
Cera Alba	0	2
Chirata	1	0
Chloral Hydras	1	0
Chloroform	0	8
„ Methyl	0	12
Cinchon: Flavæ Cortex ..	2	0
Collodium	0	4

	lbs.	oz.
Condy's Disinfectant	4 pints.	
Conf: Rosæ Gall:	0	4
„ Sennæ	1	0
Copaiba..	6	0
Creasotum	0	3
Creta Præparata	2	0
Cubebæ Pulvis..	6	0
Cupri Sulphas	0	8
Dec: Alöes Comp:	2	0
Elaterium	20 grns.	
Emplast: Belladon:	1	0
„ Calefaciens	2	0
„ Cantharid:	4	0
„ Hydrarg:	1	0
„ Opii	1	0
„ Resinæ	1	0
„ Saponis	1	0
Extract: Aconit:	0	1
„ Alöes	0	2
„ Belladon:	0	4
„ Colch: Acet: ..	0	1
„ Coloc: Co:	1	0
„ Conii	0	4
„ Ergotæ Liq: ..	0	2
„ Filicis Liq:	0	4
„ Gentian	0	4
„ Hyoscyam:	0	8
„ Nucis Vomic: ..	0	0½
„ Opii	0	2
„ Sarsæ Liquid: ..	8	0
Extract Taraxici	1	0
Ferri et Ammon: Cit: ..	0	8
„ Quiniæ Cit:	0	12
„ Phosphas	0	4
„ Sulphas	0	8
Ferrum Tartaratum	0	6
Gallæ Pulvis	0	4
Gentiana	2	0
Glycerinum	3	0
Guaiaci Resina..	0	8
Hydrarg: Iodid: Rub: ..	0	2
„ Oxid: Rub: ..	0	4

MEDICINES, &c.—continued.

	lbs.	oz.
Hydrag: Perchlorid:	0	1
„ Subchlorid: ..	1	0
Hydrargyrum cum Creta ..	0	8
Inject: Morph: Hypoderm: ..	0	1
Iodum	0	2
Ipecacuanhæ Pulvis	1	0
Jalapæ Pulvis	1	0
Lini Farina	1½ cwt.	
„ Semen	4	0
Liniment: Aconit:	0	4
„ Belladon:	0	8
„ Camphor: Co: ..	5	0
„ Iodi	0	8
„ Saponis	10	0
Liquor: Ammoniæ	2	0
„ „ Acet: Conc:	3	0
„ Arsenicalis	0	4
„ Calcis Sulph:	8	0
„ Donovani	0	8
„ Epispasticus	0	4
„ Ferri Pernit:	0	8
„ Opii Sed:	0	6
„ Plumbi Subacet: ..	2	0
„ Potassæ	4	0
„ Sodæ Chlor:	4	0
„ Styptic:	0	8
„ Zinci Chlor:	6 pints.	
Magnesiæ Carbonas	2	0
„ Sulphas	56	0
Manganese: Oxid: Nig: ..	3	0
Mel	2	0
Morphiæ Acetas	0	0½
„ Hydrochlor: ..	0	0½
Oleum Anisi	0	0½
„ Cajuputi	0	8
„ Carui	0	0½
„ Caryoph:	0	1
„ Cassiæ	0	0½
„ Crotonis	0	4
„ Lini	4	0
„ Menth: Pip:	0	2
„ Morrhuæ	36	0
„ Olivæ	12	0
„ Ricini	28	0
„ Terebinth:	8	0
Opii Pulvis	0	2
Oxymel Scillæ	2	0
Pareira	0	8
Pepsin	0	1
Pilul: Aloes et Myrrh ..	0	4
„ Assafœtid: Co:	0	2
„ Hydrarg:	1	0
„ „ Sub-Chlor: Co:	0	8
„ Phosphori	0	2
„ Rhei Comp:	0	8
„ Scillæ Comp:	0	4
Plumbi Acetas	2	0
Podophylli Resina	0	1
Potassii Bromidum	1	0
„ Iodidum	4	0
Potassa Caustica	0	1
„ Sulphurata	2	0

	lbs.	oz.
Potassæ Acetas	2	0
„ Bicarbon	3	0
„ Chloras	2	0
„ Nitras	3	0
„ Permanganas ..	0	4
„ Tartras	1	0
„ „ Acida ..	4	0
Pulv: Antim: Jacobi	0	2
„ Cretæ Arom:	1	8
„ „ „ cum Opio	1	8
„ Ipecacuanhæ Comp: ..	1	0
„ Jalapæ Comp:	2	0
„ Kino Comp:	0	4
„ Rhei Comp:	2	0
Quassia	2	0
Quiniæ Sulphas	0	8
Rhei Pulvis	0	8
Rosæ Gallicæ Petal	0	8
Santoninum	0	1
Sapo Duras	0	4
Scammonium	0	2
Senega	1	0
Senna	6	0
Sinapis	10	0
„ Charta	6 boxes.	
Soda Tartarata	6	0
Sodæ Bicarbonas	4	0
„ Carbonas	1	0
Spiritus Ætheris	1	8
„ „ Nitrosi ..	5	0
„ Ammon: Aromat: ..	3	0
„ Chloroformi	2	0
„ Rectificat:	1 pint.	
„ „ Methyl: ..	6 pints.	
Strychnia	30 grs.	
Sulphur	2	0
Syrup: Chloralis	1	0
„ Ferri Iodid:	2	0
„ „ Phosph:	1	0
„ Papaveris	1	0
„ Scillæ	5	0
„ Triplex	2	0
Tinctura Aconiti	0	8
„ Arnicæ	1	0
„ Assafœtid:	0	8
„ Aurant:	1	0
„ Belladon:	0	4
„ Benzoin: Co: ..	0	8
„ Calumbæ	1	0
„ Camphor: Comp: ..	9	0
„ Cantharid:	0	8
„ Capsici	0	8
„ Cardam: Comp: ..	3	0
„ Catechu	2	0
„ Cinchon: Comp: ..	3	0
„ Colch: Sem:	1	0
„ Digitalis	0	8
„ Ferri Perchlor ..	4	0
„ Gentian Comp: ..	2	0
„ Guaiaci Ammon: ..	0	8
„ Hyoscyami	3	0
„ Iodi	2	0

Section II. Medicines and Medical Materials.

MEDICINES, &c.—continued.

	lbs.	oz.
Tinctura Kino	0	8
„ Lavand Comp: ..	1	0
„ Lobeliæ Æther: ..	0	4
„ Myrrhæ	1	0
„ Nucis Vomicæ ..	0	4
„ Opii	4	0
„ Rhei	2	0
„ Scillæ	4	0
„ Sennæ	3	0
„ Tolutana	1	0
„ Valerian: Ammon: ..	0	8
„ Zingiber	2	0
Unguent: Cetacei	16	0
„ Hydrarg:	2	0
„ „ Nitrat: ..	1	0
„ Resinæ	2	0
„ Sabinæ	1	0
„ Simplex	2	0
Veratria	30 grs.	
Vinum Antimoniale	3	0
„ Colchici	0	8
„ Ferri	3	0
„ Ipecacuanhæ	5	0
„ Opii	0	8
Zinci Chloridum	0	2
„ Oxidum	0	8
„ Sulphas	2	0
„ Valerianas	0	2
Zingiber	0	8
„ Pulvis	1	0

	lbs.	oz.
Lint, Fine	10	0
„ Second	20	0
Surgeons' Tow	60	0
Bleached Linen Sheeting ..	yards, 2	
Calico	„ 3	
Adhesive Plaster, spread ..	„ 20	
Soap Cerate Plaster.	„ 7	
Isinglass Plaster on gauze ..	„ 1½	
Waterproof Cloth	„ 4	
Poultice Cloth	„ 2	
Straining Cloth	„ 1	
Old Linen Sheets	No 3	
Skins of Leather	„ 2	
Pins	papers 2	
Filtering Paper	quires ½	
Pill Boxes, Chip	papers 4	
„ Paper	„ 4	
Vials, ½ oz.		
„ 1 „		
„ 2 „		
Bottles, 4 „	gross 1	
„ 6 „		
„ 8 „		
Galipots, in sorts	dozen 2	
Corks, Vial	gross 2	
„ Pint	„ 1	
„ Quart	„ ¾	
Packthread	oz. 6	
Labels	1000	

Mode of obtaining supplies of Medicines.

498. Supplies of Medicines and Medical Materials in accordance with the foregoing scale will be drawn at home by half-yearly Requisitions, in duplicate, on the 1st April and 1st October, on W.O. Form 297, accompanied by half-yearly Returns on W.O. Form 299. The half-yearly Returns of General Stores will be rendered on W.O. Forms 828 and 829.

499. These demands (except in Ireland) will be put forward to the Director General by the Medical Officer in charge of each Hospital, through the Principal Medical Officer of the District.

Intermediate demands.

500. Intermediate demands will be put forward in the same manner, but they will be accompanied in each instance with a full explanation of the circumstances which render them necessary.

Requisitions from Foreign Stations.

From Foreign Stations the Requisitions will be annual, dated the 1st April, on W.O. Form 297, with Returns on W.O. Form 828 and 829, for the year ending the 31st March.

Demands for Medicines and Instruments to be on separate Forms.

501. Demands for Medicines and Surgical Instruments and Materials will not be included on the same Form; the former will be indented for on W.O. Form 297 or 884, and the latter on W.O. Form 300.

Transfer Returns.

502. When a Medical Officer is removed from any charge where the custody of Medicines is included, a Transfer Return in detail, up to the date of relinquishing such charge, will be prepared in duplicate on W.O. Form 299, which will be duly

signed both by the Medical Officer giving over and the Medical Officer receiving the Stores. One copy will be transmitted to the Director General of the Army Medical Department, through the Principal Medical Officer, and the other will be retained for reference.

503. The scale contained in paragraph 497 has been framed with the view of placing at the disposal of Medical Officers such a choice of remedies as it is presumed will be sufficient to meet all the wants of the sick; but it is of course to be understood that the whole of the articles specified therein are not required for any one service. Extra articles not included in the scale will only be sanctioned under very exceptional circumstances, which will be fully explained at the time of making the demand. In putting forward requisitions to the Director General the Principal Medical Officer of each District will carefully examine them in order to satisfy himself that they are strictly in accordance with the scale, and that the articles demanded are absolutely necesary for the use of the service for which the demand is made. Demands to be confined to the recognized scale.

504. Medicines supplied by different firms will not be mixed together in the same jar or bottle, in order that, should objection be made to their quantity or quality, no difficulty may be experienced in applying to the Contractor who supplied them. Supplies of Medicines from different Firms to be kept separate.

505. On the 1st of October in each year a report will be transmitted to the Director General on all supplies of Medicines received during the past twelve months. Any objections, therefore, as to the age, adulteration, or chemical defects of the Medicines will be noted from time to time, that the report may be fully substantiated. All losses or casualties resulting from bad packing, leakage, or accident will, at home, be reported at the time of receiving the stores. Annual Report of Medicines.

506. On the receipt of supplies of Medicines at Foreign Stations every case or other package will be opened, and its contents carefully examined in the presence of a Board of Medical Officers, by whom notice must be taken, in all cases of breakage, whether there is any deficiency of packing material, or other circumstance to lead to the belief that the loss resulted from insufficient or careless packing; or whether any external marks exist on the cases showing that they have been subjected to rough usage in transit. Such observations will be fully recorded in the copy of the proceedings transmitted to the Director-General, Army Medical Department. Supplies for Foreign Stations.

507. On Home Service, all empty bottles and packages in which supplies of Medical Stores have been received, will be carefully preserved from damage, and such as will not probably be wanted for further Hospital use will be reported to the Director General, either on the 1st of April or the 1st of October, a detailed list being furnished, in duplicate, stating the number and description of each article, and particularly specifying the Disposal of empty bottles and packages on Home Service.

packages which are serviceable, and the numbers of each kind of bottle or jar which have not contained oils, turpentine, copaiba, or ointment, together with estimates of the highest sum obtainable for these stores, if disposed of locally. The proposed sales, when approved by the Director General, will be forthwith effected, the proceeds thereof duly handed over to the Departmental Paymaster, and a notification of the payment transmitted to the Director General.

Disposal of empty bottles and packages on Foreign Service.

508. On Foreign Service, sales of empty bottles, packages, and other articles will be made under the orders of the Principal Medical Officer at each station annually, or more frequently if deemed expedient, and the proceeds of such sales will be immediately paid into the military chest, and duly reported to the Secretary of State for War.

Purchases of Medicine.

509. Medicines or other articles not contained in the scale set forth in paragraph 497, will not be allowed at the public expense if purchased without the previous sanction of the Director General at home, or of the Principal Medical Officer abroad, unless under circumstances so urgent as not to admit of the delay of reference, in which case a covering authority will be obtained as early as possible. All bills for such urgent purchases, purchases of leeches, and for carriage of stores, after being certified to the effect that the articles or leeches were absolutely necessary, that they were obtained on the best and cheapest terms, and that the stores for which carriage is charged were solely for the public service, will be sent to the Principal Medical Officer of the District for examination, who will cause an abstract in duplicate on W.O. Form 292, to be prepared, in order that the same may be forwarded at the end of each quarter (with the bills) to the Director General of the Army Medical Department for his final approval. The bills, with one copy of the abstract, will be returned for payment with as little delay as possible to the Departmental Paymaster of the District, through the Principal Medical Officer of the same. The foregoing instructions will not apply to Foreign Stations.

510. Such articles as vinegar, linseed meal, loaf sugar, and mustard, when necessarily provided by the Commissariat Department for medical purposes, will be included in the abstract referred to in the foregoing paragraph, the Commissariat Officer giving the necessary information.

Medicines for soldier's families.

511. On each prescription or order for medicines for a soldier's wife or child will be written the regimental number, name, rank and corps of the husband or father, which will be signed by the Prescribing Officer. Every prescription or order for Medicines for Officers, and all others received at the Surgeries will bear the signature of the prescribing Medical Officer, and will be copied daily in a book (W.O. Book 39) to be used for that purpose; each entry will bear the signature of the Compounder

of Medicines, or qualified person who dispensed the prescription, which will be retained and filed for future reference.

512. At each visit to, or inspection of, a Hospital or Surgery all prescriptions and entries will be carefully compared by the Principal Medical Officer, who will ascertain the accuracy of all entries, and satisfy himself that the issue of all Medicines and Materials has been properly made and regularly accounted for.

513. The Field Companion authorised by the Director General for the use of Regiments and Corps will be under the charge of the Medical Officer doing duty with such Regiment or Corps, and he will be held responsible for the same, and will include it in the manuscript return required to be furnished by paragraph of these Regulations. Equipment of Medicines for Regiments and Corps.

514. The supply of Medicines for Troops embarked coastwise and proceeding on, or returning from, Foreign Service (except India), is provided for by the Regulations for Medical Officers in charge of Troops on board ship, paragraph 74. In all cases of issues of Medical equipment from General Stores to Troops embarking for, or returning from, Foreign Service, Invoices in duplicate, duly signed by the Medical Officer receiving the supply, will be forwarded at once to the Director General. Equipment of Medicines for Troops on board ship.

515. The undermentioned equipment will be furnished by the Principal Medical Officer at a port of embarkation for the use of Transports specially engaged in Troop Service. Medical and Surgical equipment for Transports specially employed.

Medicine Chest, complete.
Case of Surgeon's Instruments.
Tooth Instruments.
Stomach Pump.
Box of Fracture Apparatus.

516. This equipment will be retained on board until the period for which the Transport is taken up has expired, when it will be returned into Army Medical Stores at home.

517. All articles for disinfecting purposes will be obtained from the Commissariat Department, and will not be included in requisitions put forward to the Director General. Disinfectants.

PART 4.—MEDICAL ATTENDANCE AND EXAMINATION.

SECTION I.—MEDICAL ATTENDANCE.

I.—General Instructions.
II.—Officers, their Wives, Children, and Civilian Servants.
III.—Non-Commissioned Officers and Soldiers.
IV.—The Wives and Children of Non-Commissioned Officers and Soldiers.
V. Officers, Pensioners, Non-Commissioned Officers and Soldiers of the Army Reserve when called out for duty.
VI.—Staff Officers of Pensioners, and Governors of Military Prisons.
VII.—Non-Commissioned Officers of Enrolled Pensioners, their Wives and Children.
VIII.—Pensioners, Clerks, Permanent Labourers, and other Civilians employed under the War Department.
IX.—Employment of Private Medical Practitioners.

I.—GENERAL INSTRUCTIONS.

Definition of the term "Medical attendance."

518. The term "medical attendance" throughout these regulations means the professional advice and care during sickness or injury afforded by a Medical Officer or by a Private Medical Practitioner appointed to take Medical charge of Troops. Medical attendance will be restricted to the persons detailed in the following regulations, and subject to the conditions therein laid down; it will include the supply of medicines prescribed by the Medical Officer in charge of the case, and ordered by him from the public stock, or the medicines prescribed and supplied by a Private Medical Practitioner when appointed.

Supply of medicines limited to conditions quoted above.

Admission to Hospital explained.

519. No person unless authorised by regulation will be admitted into Military Hospitals without the special sanction of the Secretary of State, and any departure from this rule will render the officer authorising such deviation liable for all expenses which may be incurred.

GENERAL INSTRUCTIONS—continued.

520. No issue of medical comforts or diets will be made to any person not entitled to them by regulation, and any articles of this nature ordered on the authority of Commanding or Medical officers for women, children, or other persons not entitled thereto will not be sanctioned as a charge against the public, and the value of all articles so issued will be recovered from the Officers on whose certificate the issues were made. Medical comforts or diets.

521. Attendance cannot be claimed for women during their confinement (with the exception of the wives of soldiers admitted into Female Hospital), unless the assistance of a Midwife or Civil Practitioner cannot be procured, or unless the Midwife or Civil Practioner privately employed should require the assistance of a Medical Officer in any case of danger. Attendance cannot be claimed in any case of childbirth.

522. When medical attendance is claimed from a Medical Officer for any persons who are not enlisted soldiers or members of their families, and not belonging to the Corps to which the Medical Officer may be attached, a Nominal Roll (on W. O. Form 1328), with the rank or occupation and address of each person, will be furnished by the Officer Commanding, or the Head of the Department, on the first of each month to the Principal Medical Officer, or to the Senior Medical Officer of the Station, and no person will be considered entitled to medical attendance whose name is not included in this Monthly Roll. Nominal Roll of persons claiming medical attendance, to be furnished to the Medical Officer.

II.—OFFICERS, THEIR WIVES, CHILDREN, AND CIVILIAN SERVANTS.

523. Officers are entitled to medical attendance at the public expense only at Stations where there is a Medical Officer nominated for the duty, or where a Private Medical Practitioner is employed at contract rates for attendance on Non-commissioned Officers and men, and provided that in each case the Officer claiming medical attendance is on full pay, or holding a staff appointment at the Station, and resides within a radius of one mile from the Army Dispensary. In all cases of attendance by a Medical Officer, the medicines ordered by him will be obtained from the Military Dispensary. Conditions of attendance.

524. Sick Officers, on the recommendation of a Medical Board, may be admitted for treatment into Military Hospitals at Stations where special accommodation has been authorised, and on payment of the regulated stoppages. Admission to Hospital.

525. The Wives and Children (up to 14 years of age) of Officers will be entitled to medical attendance and medicine at the public expense only when the Officers are serving under the conditions stated in paragraph 523. Officers' wives and children.

526. Officers will be allowed medical attendance and medicine at the public expense for civilian servants, on the conditions stated in paragraph 523. The attendance will be allowed only for Civilian servants of officers.

OFFICERS, THEIR WIVES, &c.—continued.

servants actually kept and not exceeding the numbers authorised by the Regulations relating to servants allowance published in the Army Circulars.

527. When an Officer is allowed the services of a soldier servant, or employs any soldier, orderly, labourer, messenger, or other person paid by the Government to act in any capacity as servant, the soldier or other person so employed must be reckoned as part of the maximum number of servants, as stated in the above Schedule, for whom medical attendance will be allowed.

Civilian servants to attend at Dispensary.

528. Civilian servants of Officers requiring medical attendance and medicines will attend at the Military Hospital, Dispensary, or residence of the Private Medical Practitioner (as the case may be) at fixed hours, unless their illness be of such a nature as to prevent their doing so, in which case they will be visited at their master's quarters or residence, provided it is within the prescribed radius.

Names and occupations to be specified monthly.

529. The names and occupations of civilian servants for whom medical attendance is claimed will be specified each month in W. O. Form 1328.

Claims of Private Medical Practitioners employed by Officers.

530. Private claims for reimbursement on account of the services of Medical Practitioners employed by any Officer of the Army, or by members of the Military and Civil Departments for attendance on themselves, their wives, children, or servants, or for medicine purchased by them will not be entertained under any circumstances.

III.—NON-COMMISSIONED OFFICERS AND SOLDIERS.

Non-commissioned Officers and Soldiers entitled to admission to Hospital.

531. All Non-commissioned Officers and Soldiers, when present, doing duty and borne on the muster roll of their respective corps or depôt, or when employed on detached duty, or on furlough; also seamen of the Royal Navy and Non-commissioned Officers and Men of the Royal Marines when sick will be admitted to Military Hospitals, and there provided with medical attendance, medicines, and diet, subject to the regulated stoppages.

Where there is no military hospital.

532. Where there is no Military Hospital, all Non-commissioned Officers and Soldiers when on duty or on sick furlough will also be entitled to medical attendance at the public expense; but this does not apply to soldiers on ordinary furlough or to deserters, who, however, if necessity arise, may be treated in Military Hospitals. Claims for medical attendance on such men from Private Medical Practitioners are, however, inadmissible.

Discharged Soldiers unable

533. In any exceptional case where from sudden illness or other cause it is necessary to subsist a discharged man in hos-

NON-COMMISSIONED OFFICERS AND SOLDIERS—continued.

pital, he will, if a pensioner, be charged a stoppage of 1*s.*, subject to the provision, that if his pension be not equal to 1*s.* 3*d.* a day, the rate of stoppage will be such as to leave him a balance of 3*d.* a day. If the soldier be discharged without a pension he will be subsisted free.

through illness to proceed to their destination.

IV.—THE WIVES AND CHILDREN OF NON-COMMISSIONED OFFICERS AND SOLDIERS.

534. The wives of Non-commissioned Officers and Soldiers who are borne on the Married Roll of Corps, with their legitimate children and step-children (up to 14 years of age), will, when present with Corps, be allowed medical attendance and medicine at the public expense only at Stations where there is a Medical Officer, or where a private Medical Practitioner is employed at contract rates, and provided in each case that they reside within a radius of one mile from a Military Dispensary.

Women must be on Married Roll to be allowed medical attendance.

535. Medical comforts will only be issued to the wives and children of the Non-commissioned Officers and Soldiers detailed in the preceding paragraph, and under the conditions therein specified, when they are sick, and are treated in their quarters. No medical comforts will be issued unless they can be procured from a Military Hospital.

Women and children entitled to medical comforts.

536. The following are the medical comforts which will be issued, viz., wines, port or sherry, brandy, arrowroot, and essence of beef or extractum carnis; fresh meat will not be supplied for the preparation of beef tea.

Medical comforts detailed.

537. Previous to the first issue of medical comforts, the signature of the Officer Commanding will be obtained to the certificate on W.O Form 1200, on which an entry of all demands for issues will be made daily by the prescribing Medical Officer, and the cases of all individuals requiring medical comforts will be entered in the case book (W.O. Book 187).

First issue of medical comforts.

538. The wives of Non-commissioned Officers and Soldiers may be admitted into Hospital under the conditions laid down in Part 2, Section V of these Regulations.

Admission to female Hospital.

539. The wives and children of the Militia Staff occupying quarters in barracks will not be entitled to medical comforts unless the Non-commissioned Officers are transfers serving under their Army engagement, in which case the medical comforts detailed in paragraph 536 will be issued.

540. Medical Officers are at liberty in urgent cases to attend the wives and children of soldiers married without leave, and to supply medicines for them from the public stock to a limited extent at the discretion of the Principal Medical Officer; in all such cases the prescriptions will be filed in the surgery for subsequent examination.

V.—OFFICERS, PENSIONERS, NON-COMMISSIONED OFFICERS, AND SOLDIERS OF ARMY RESERVE WHEN CALLED OUT FOR DUTY.

Medical attendance on Army Reserve.

541. Officers, Pensioners, Non-commissioned Officers, and Soldiers of the Army Reserve when called out for training or duty will, while so employed and if taken ill during the period of such duty, be treated, as regards medical attendance and hospital accommodation, in all respects as other Officers and Soldiers in Her Majesty's Service, subject to such stoppages as may from time to time be authorised.

VI.—STAFF OFFICERS OF PENSIONERS AND GOVERNORS OF MILITARY PRISONS.

Staff Officers of Pensioners and governors of prisons.

542. Staff Officers of Pensioners and Governors of Military and Provost Prisons will be entitled to medical attendance at the public expense—

a. For themselves, subject to the conditions stated at paragraphs 523 and 524

b. For their wives and children, subject to the conditions stated at paragraph 525.

c. For civilian servants, subject to the conditions stated at paragraphs 526 to 528.

VII.—NON-COMMISSIONED OFFICERS OF ENROLLED PENSIONERS, THEIR WIVES AND CHILDREN.

Non-commissioned Officers of Pensioners.

543. Non-commissioned Officers employed on the Out-Pension Staff under Staff Officers of Pensioners, and permanent Warders in Military and Provost Prisons will be entitled to medical attendance and medicines for themselves, their wives, and children up to 14 years of age, at the public expense, provided they reside within one mile from an Army Dispensary; but where their duties compel them to live beyond that radius, a Private Medical Practitioner may be employed at contract rates to attend them, in all cases subject to the conditions stated in paragraphs 534 to 540.

Inspection of a Pensioner when required by Staff Officer.

544. Any Pensioner brought before a Medical Officer for inspection at the request of a Staff Officer of Pensioners will be examined, and the requisite certificate furnished.

VIII.—PENSIONERS, CLERKS, PERMANENT LABOURERS, AND OTHER CIVILIANS EMPLOYED UNDER THE WAR DEPARTMENT.

Medical attendance on Pensioners and their families.

545. Pensioners employed in the Military and Civil Departments of the Army, occupying quarters in barracks by War Office authority, will be allowed medical attendance at the public expense for themselves, their wives, and children up to 14 years of age, at Stations where there is a Medical Officer or a Private Medical Practitioner in attendance on Non-commissioned Officers and Men of the Army, and provided that in every case they reside within the radius of one mile from the Army Dispensary of the Station.

Medical attendance on clerks, labourers and others employed in Civil Departments of the Army.

546. Civilian Clerks, labourers, and those on the permanent establishment of the Civil Departments of the Army, whose terms of engagement subject them to the conditions of the Mutiny Act and Articles of War, will be considered entitled to medical attendance for themselves, their wives, and children up to 14 years of age, under similar conditions to those specified in paragraphs 534 to 540.

Medical attendance on civilians employed in Manufacturing Department.

547. Civilians on the fixed establishments of the Manufacturing Departments under the control of the War Office will be entitled to medical attendance for themselves, their wives, and children under 14 years of age; but workmen and labourers on the Wages List will be entitled to individual medical attendance only, after 3 years' continuous service, except in cases of injury from accident on duty. In both cases the residences of those requiring medical attendance must be within the radius of one mile from the Dispensary. This limit of distance, however, does not apply to the Royal Arsenal, Woolwich where the radius of one mile has been fixed from a point equidistant from the main and Plumstead gates, as shown by a yellow semicircle in a plan kept at the Offices of the Heads of Departments, Royal Arsenal.

Pensioners and others occupying quarters attacked with infectious disease.

548. Pensioners or others employed in the Military or Civil Departments of the Army and occupying quarters in barracks by War Office authority, when attacked by any contagious or infectious disease which, in the opinion of the Senior Medical Officer, renders their removal to Hospital necessary on sanitary grounds, will be admitted to Military Hospitals (subject to special hospital stoppages) whenever hospital accommodation can be made available for them.

IX.—EMPLOYMENT OF PRIVATE MEDICAL PRACTITIONERS.

Officer commanding empowered to

549. If there be no Medical Officer at a station where there are Non-commissioned Officers and soldiers entitled by

EMPLOYMENT OF PRIVATE MEDICAL PRACTITIONERS—continued.

employ private Medical practitioners.

the foregoing regulations, to medical attendance and medicine at the public expense, the Officer Commanding at the station may, under the provisions of Art. 434 of the Royal Warrant of 1st May, 1878 (Revised Army Regulations, Vol. I), engage the services of a properly qualified Private Medical Practitioner for attendance on the Non-commissioned Officers and Soldiers present. The Private Medical Practitioner employed in this service will receive the weekly contract rates laid down in that Article. On the employment of a Private Medical Practitioner, which will be duly reported to the Principal Medical Officer of the district, all persons at the same station who are entitled to medical attendance, on the conditions laid down in these regulations, will be included in the numbers to be attended, provided they reside within the prescribed radius of one mile from the Military Dispensary.

For Non-commissioned Officers and soldiers, &c. detached.

550. When a Military Foreman of Works or a Non-commissioned Officer of the Royal Artillery, Royal Engineers, or any Corps, is sent for duty, for any period likely to exceed one month, to a station where there is no Medical Officer, or where, if one be present, his services owing to distance cannot be made available, the Officer Commanding the Corps will obtain the services of a duly qualified Medical Practitioner, for all those of the party entitled to medical attendance, at the contract rates agreeably to the directions contained in paragraph 549.

Nominal rolls to be forwarded.

551. Where a Private Medical Practitioner has been employed at contract rates, the several Commanding Officers and Heads of Departments will, on the first of each month, furnish him with a nominal roll (on W.O. Form 1328) of all persons other than soldiers who are entitled to medical attendance, and in every case the rank, occupation, and address of each person will be stated on the rolls. In the case of a detachment of soldiers consisting of more than 10 Non-commissioned Officers and Privates, these rolls will not be necessary.

All persons to be included in one claim.

552. All persons, though belonging to different Corps or Departments at the same Station, will be attended by the same Private Medical Practitioner, and the total number included in one claim on W.O. Form 154, which will be certified and signed by the Senior Military Officer at the Station.

How claims are to be forwarded.

553. Under ordinary circumstances no claim for medical attendance will be entertained unless made in conformity with the rates referred to in paragraph 549, and unless it is submitted by the Military Officer who engaged the services of the Private Medical Practitioner direct to the Secretary of State for War at the end of each quarter, or at the termination of the service if for less than a quarter, on W.O Form 154, to which the lists on W.O. Form 1328 will invariably be attached. Where, however, exceptional circumstances have arisen in the

EMPLOYMENT OF PRIVATE MEDICAL PRACTITIONERS—continued.

employment of a Private Medical Practitioner to necessitate a departure from any of the foregoing instructions, full explana- of the circumstances will be given in each case, and the particulars of the claim furnished by the responsible Military Officer will be submitted on W.O. Form 296, for the approval of the Secretary of State for War.

554. The claims, when they have been approved by the Director General of the Army Medical Department, will be returned to the Military Officers who signed them, for settlement by the Staff Paymasters of Districts.

Settlement of claims.

555. Whenever a Civil Medical Practitioner may be employed at any Garrison or Station for the treatment of cases of infectious or contagious diseases among Officers, Non-commissioned Officers or their families who are not attended by a Military Medical Officer, a report of the case must at once be obtained by the Officer or Soldier employing him aud forwarded for the information of the Officer Commanding, and the Senior Medical Officer at the Station (*see* G.O. 45, of July 1877).

SECTION II.—MEDICAL EXAMINATION OF RECRUITS AND RE-ENGAGED MEN.

I.—Inspection of Recruits.
II.—General Examination of Recruits.
III.—Special Examination.
IV.—General Instructions.

I.—INSPECTION OF RECRUITS.

Physical capacity of recruits.

556. In the Inspection of Recruits, Medical Officers, must be guided by their judgment and experience in rejecting men who do not possess the physical capacity requisite for the endurance of the toil, hardships, and exposure, incidental to Military life.

557. The principal points to be attended to are:—

a. That the recruit is sufficiently intelligent.
b. That his vision is sufficiently good to enable him to see clearly with either eye at the required distance.
c. That his hearing is good.
d. That his speech is without impediment.
e. That he has no glandular swellings or marks of scrofula.
f. That his chest is capacious and well formed, and that the soundness of his heart and lungs has been ascertained by means of the stethoscope.
g. That he is not ruptured.
h. That the limbs are well formed and fully developed.
i. That there is free and perfect motion of all the joints.
j. That the feet and toes are well formed.

Mental capacity.

558. Great care is to be taken in ascertaining the mental capacity of recruits.

Height, weight, and chest measurement.

His height, weight, and chest measurement must also accord with his age. [See G. O. 19, Recruiting, March 1878, and table therewith.]

Grounds of rejection.

559. Men presenting any of the following conditions will be rejected:—scrofula; phthisis; undoubted primary or secondary syphilis; impaired constitution; defective intelligence; defects of vision, voice, or hearing; hernia; hæmorrhoids; varicose veins beyond a limited extent, or marked varicocele with testicle unusually pendant: inveterate cutaneous disease; chronic ulcers; traces of corporal punishment, or evidence of having

INSPECTION OF RECRUITS—continued.

been marked with the letters D. or B.C.; contracted or deformed chest; abnormal curvature of spine; or any other disease or physical defect calculated to unfit them for the duties of a soldier.

560. When not required to approach the recruit for special objects, the surgeon should always take his place at a distance of about six feet from him. The recruit should be placed so that the light may fall upon him.

II.—GENERAL EXAMINATION OF RECRUITS.

Directions for General Examination.

561. The recruit being wholly undressed, the following directions are given *seriatim:*—

a. Walk up and down the room smartly two or three times.
b. Hop across the room on the right foot.
c. Back again on the right foot.
d. Hop across the room on the left foot.
e. Back again on the left foot.
(The hops should be short and upon the toes.)
f. The recruit is halted, standing upright, with his arms extended above his head, while the surgeon walks slowly round him, carefully inspecting the whole surface of his body.

562. This completes the general examination. The objects to be observed and noted in this part are the following:—the existence of any obvious defects in physical constitution; the formation and development of the limbs; the power of motion in joints, especially in the feet and hips: flatness of the feet; formation of the toes: skin disease; varicose veins; cicatrices or ulcers; marks of the letter D., or letters B.C., or of medical treatment; and any special marks from congenital or accidental causes. If any obviously disabling defects are noticed in the general examination, it is of course not necessary to proceed with the exercise further. If no such defects are found, the second part of the examination will be at once proceeded with.

III.—SPECIAL EXAMINATION.

Examination of the trunk.

563. The trunk will be examined from below upwards. The recruit stands with his arms extended above his head, the backs of the hands being in contact. The following will be the order of inspection:—

a. The surgeon notes indications of venereal disease.
b. He examines the scrotum to ascertain if the testicles have descended and are normal, or if there be varicocele.

SPECIAL EXAMINATION—continued.

c. He inserts the point of his finger in the external abdominal ring of each side, and desires the recruit to cough two or three times, to ascertain if he be ruptured or liable to that condition.

d. He examines the abdominal walls and parietes of the chest.

e. He desires the recruit to "take in a full breath" several times, while he watches the action of the chest. Careful stethoscopic examination is made.

f. He examines the action of the heart, and notes its sounds.

564. This comprehends the inspection for venereal disease, disease of the testes, varicocele, hernia, visceral disease of the abdomen and chest, and capacity of chest.

The lower extremities and back.

565. The inspection of the lower extremities and back will be made from below upwards. The recruit first faces the surgeon, afterwards turns his back to him. The following are the directions given:—

a. Stand on one foot, put the other forward.

b. Bend the ankle joint and toes of each foot alternately, backwards and forwards.

c. Turn round. Kneel down on one knee.

d. Up again.

e. Down on the other knee.

f. Down on both knees, and up from that position with a simultaneous spring of both legs.

g. Separate the legs.

h. Touch the ground with the hands.

566. While the recruit performs these movements, the surgeon will observe the action of the knee-joints, the condition of the perinæum, and of the spinal column.

567. This includes the inspection for defects of the toe, ankle, and knee-joints; for hæmorrhoids, prolapsus ani, fistula in perinæo, and spinal deformity.

The upper extremities.

568. The examination of the upper extremities will be made from below upwards. Time is saved by the surgeon himself acting as well as telling the recruit the movements he desires to be made. The following are the directions:—

a. Stretch out your arms with the palms of your hands upwards.

b. Bend the fingers backwards and forwards.

c. Bend your thumbs across the palms of your hands.

d. Bend the fingers over your thumbs.

e. Bend your wrists backwards and forwards.

f. Bend the elbows.

g. Turn the backs of the hands upwards.

h. Swing your arms round at the shoulders.

SPECIAL EXAMINATION—continued.

569. The surgeon will approach the recruit and examine for marks of vaccination.

570. This comprehends the inspection for loss or defects of the fingers, thumbs, wrists, elbow and shoulder-joints; power of rotating the forearm, and vaccination. If not vaccinated, the circumstance should be stated on the attestation paper.

571. The examination of the head and neck will be made from above downwards. The surgeon will note the intelligence, character of voice, and power of hearing of the recruit by his replies to the questions put to him. The following are the directions:— The head and neck.

a. Have you had any blows or cuts on the head? Are you subject to fits of giddiness? The surgeon at the same time examines the scalp.
b. The surgeon examines the ears.
c. Do you see well? The surgeon examines the eyes and eyelids.
d. He examines the nostrils.
e. He examines the mouth, palate, and fauces, and then tells the recruit to say loudly, "Who comes there?"
f. He examines the neck.
g. The recruit is desired to dress himself.
h. The special tests for power and range of vision are applied to each eye, as directed on the card of test dots W. O. Form 1233, furnished for that purpose.

572. This comprehends the inspection for injuries of thehead; deafness; disease of the ears; defect of voice; polypus of nose; state of teeth; scrofulous ulceration; glandular enlargements; and defects of vision.

IV.—GENERAL INSTRUCTIONS.

573. If the examining Surgeon detect a recruit simulating disabilities, he is to attach a slip of paper to the man's attestation, containing a statement of the fact. Simulation of disability.

574. The signature of an Examining Surgeon to an attestation will be considered tantamount to a declaration that he personally examined the recruit in question according to these instructions, and that the man has no blemish or defect, except those noted on the attestation; remarks relative to any defects in the recruit will be in the Examining Officer's own handwriting. Medical Officers' certificate.

575. The approving Officer is responsible for the measurement of recruits as regards standard and chest, and for their age being in accordance with the schedules given in General Orders from time to time. Measurement of recruits.

576. The Medical Officer will enter (in pencil) on the left hand corner of the Attestation, 2nd page, the chest measurement made Attestation.

Section II. Medical Examination of Recruits and Re-engaged Men.

GENERAL INSTRUCTIONS—continued.

by him, and his opinion of the man's age, in order to assist the approving Medical Officer in forming his judgment; but the Medical Officer is not held responsible for any ultimate rejection or for any decision contrary to the opinions he may have given.

Whether Recruit has previously served.

577. The Medical Officer will also note on the Attestation his opinion whether, judging from the medical inspection, or from the general appearance of the recruit, the man has previously served.

Recruits passed by a Civil Practitioner.

578. Recruits passed by Civilian Medical Practitioners (including Medical Officers of Militia and Yeomanry, except when their regiments are embodied or out for training) will in all cases be re-examined by a Military Medical Officer.

Recruits found unfit.

579. When a recruit, who has not been passed by a Military Medical Officer, is found on joining his corps from a Sub-District, to be unfit for service, a fully detailed report on his case will be made on W. O. Form 584, by the Medical Officer who considers him unfit, and who will state not only the nature of the disability, but also its extent.

580. In the case of recruits primarily passed by Civilian Medical Practitioners, who may be considered unfit for service on the secondary examination by the Medical Officer of the Brigade Depôt of the Sub-District in which they are raised, no report on W. O. Form 584 will be necessary.

Approval of a recruit by a Military Medical Officer considered final.

581. The approval of a recruit by any Military Medical Officer is to be held as final at the corps to which he may be sent, and the man if considered unfit for service can only be brought forward for discharge as an invalid.

582. An extract of paragraph 14, also paragraph 22, Section 19, Queen's Regulations and Orders for the Army, 1873, are re-published for the information of Medical Officers.

Boys.

14. "No boy is to be received into the service for the purpose of being trained as a trumpeter, drummer, or bugler, who does not, from his make and stature, give fair promise of growth, and of becoming, when he has attained the proper age, an effective soldier." * *

Men re-engaging before expiration of service.

22. "Soldiers wishing to re-engage while serving are not to be rejected on account of minor defects or trivial ailments which do not interfere with the efficient performance of their duties. The medical certificate in the re-engagement schedule is to be considered final so far as their physical fitness is concerned."

Medical Report on soldiers considered unfit for re-engagement.

583. When a soldier is considered physically unfit for re-engagement, the Medical Officer will draw up a medical report of the case on the re-engagement schedule, according to the instructions on the 4th page of that Form; the opinion of the Principal Medical Officer will also be recorded on the same page.

Doubtful cases.

584. In doubtful cases, the soldier may be allowed to appear

GENERAL INSTRUCTIONS.—continued.

before a medical board with a view to a decision being arrived at as to his fitness or unfitness to re-engage.

585. Recruit registers (W. O. Book No. 46) will be kept by Medical Officers employed in recruiting duties, in charge of Brigade Depôts, and General or Station Hospitals. Separate recruit registers will be kept for the Regular Army and the Auxiliary Forces. These registers will on no account be removed from the office or hospital where the recruits are medically inspected. Recruit Register.

586. In filling up the column headed "Trade or Occupation," the journeyman will be distinguished from the master in all cases. The term "Agricultural Labourer", will apply to all labourers in agriculture (except shepherds) not living in the farm house; those living in the house of the farmer will be more correctly designated as "Farm Servants." In the case of workers in manufactures and mines, and generally in the constructive arts, the particular branch of work and the material will always be distinctly expressed. The term "Farmer" should be applied only to those who have occupied land. The sons of farmers may be returned "Farmers' Sons" when not agricultural labourers. Directions for filling up.

587. The cause of fitness or unfitness, and remarks with regard to vaccination, will invariably be entered in the handwriting of the Medical Officer.

588. The certificates as to the fitness of recruits on W. O. Form 497 (2nd page), will both be signed by the Examining Medical Officer, whose examination is final, if no previous examination has been made, and if the first certificate has not been signed. Certificate of fitness.

589. Militia recruits passed by an Army Medical Officer cannot be rejected by a Militia Surgeon; such cases will be referred to the principal Medical Officer of the District. Militia Recruits passed by an Army Medical Officer.

SECTION III.—INVALIDING OF SOLDIERS.

Soldiers brought forward for invaliding at the head-quarters of a district.

590. When soldiers serving at the head-quarters of a district are considered unfit for further service, a detailed medical history of each case on W.O. Form 891, accompanied by the soldier's medical history sheet (W.O. Form 1143), will be submitted for approval to the Principal Medical Officer, who will inspect the proposed invalids; if found unfit by him, they will be subsequently examined by a Medical Board for final decision. The president of the board, if possible, will not be under the rank of Deputy Surgeon-General.

591. Para. 27, of Section 20, Queen's Regulations and Orders for the Army, 1873, is here re-published for the information of Medical Officers:—

Invalids at out-stations.

> " . Before any soldier is sent in from an out-station to the head-quarters of the district, for the purpose of being invalided, a detailed medical history (W.O. Form 891), and his medical history sheet, together with any statements or remarks deemed necessary for the elucidation of the case, are to be forwarded to the Principal Medical Officer of the district, who, on receipt of these documents, will signify to the Medical Officer his concurrence, or otherwise, in the necessity for the proposed transfer. Should the Medical Officer concur, steps will be taken through the military authorities for the invalid's removal to head-quarters, as directed in the preceding paragraph (26). The medical history sheets are in all cases to be returned to the out-station after perusal."

Medical invaliding Board.

592. A medical board, assembled for the purpose of examining invalids, will record their opinion on the third page of the detailed medical history (W.O. Form 891), and their proceedings will be submitted for the approval of the Principal Medical Officer.

593. Para. 28 of Section 20, Queen's Regulations and Orders for the Army, 1873, is here re-published for the information of Medical Officers:—

Men unfit for further service.

> " . Should the medical board, in ordinary cases, pronounce the men unfit for further service, the General Officer Commanding will then come to a decision, with the assistance of the Principal Medical Officer, and transmit in a covering-letter to the Adjutant-General [or if in Ireland, to the Deputy Adjutant-General in Dublin], on W.O. Form

INVALIDING OF SOLDIERS—continued.

85, a return of those men proposed for discharge, sending back at his discretion to their respective corps those found fit for further service. A very brief statement of the cause of disability is sufficient in this return, the details being inserted in the medical report accompanying the proceedings of the board. When finally passed as unfit, the General Officer Commanding will cause the discharge board to be at once assembled to record the men's services."

Detailed medical history.

594. When the invalids have been inspected by the General Officer Commanding, their detailed medical histories (W.O. Form 891), and medical history sheets (W.O. Form 1143), will be sent to the Medical Officer in charge of the Station Hospital for transmission to the Officer Commanding, when authority has been received from the Adjutant-General for their discharge. To facilitate reference, the detailed medical history (W.O. Form 891), of each invalid will be duly completed with the required information according to the instructions detailed on the form.

Summary of causes of invaliding or remand.

595. The summary of causes of invaliding, or remarks on remand to regiment, station, or depôt, will be made on the fourth page of the detailed medical history, and will be signed by the Principal Medical Officer.

Care to be taken in the preparation of the detailed medical history.

596. The information required in the detailed medical history being very essential in order to secure a proper treatment and disposal of the invalid, as well as to adjust correctly his claim on the bounty of the public, Medical Officers will be exceedingly careful in the preparation of this document, and will enter all such particulars as may aid in the attainment of the ends desired.

Medical report on the invalid's discharge document.

597. The medical report to be entered on the discharge documents of every invalid, W.O. Form 83 (or 619, in cases of men attested, on the combined form), must be a concise statement of his case, and in strict accordance with the instructions detailed on these forms.

Testimony of invalid, and information gained from other sources.

598. In all statements made by a Medical Officer in these medical histories and reports, he will carefully distinguish between the testimony of the invalid, or of others, and the results of his own observation, or of a reference to authentic documents.

Cases of epilepsy.

599. When a soldier is brought forward to be invalided for epilepsy, a certificate from a Medical Officer, stating that he has actually seen the man in a true epileptic fit, will be attached to the detailed medical history.

Invalids referred back by a Medical Board.

600. An invalid who has been referred back by a medical board for further treatment, or is considered fit for service, will not be again brought forward for invaliding until the expiration of six months from the date of his examination by the board.

Section III. Invaliding of Soldiers.

Detailed medical history to accompany invalids.

601. In the case of invalids sent home from foreign stations for change of air or discharge, the detailed medical history (W.O. Form 891), will be handed over to the Medical Officer proceeding in charge, in order that he may be acquainted with the nature of the cases under his care, and also that he may continue, on the space assigned for that purpose, the history of the progress and the treatment of each invalid up to the date of his arrival at the invalid depôt. The medical report on W.O. Form 83, or 619, will not be filled up until the men are finally disposed of at home.

Return of invalids from foreign stations excepting India.

602. When invalids are sent home from foreign stations (except India), a nominal return briefly recording their disabilities will be made on W.O. Form 821. The names of men eligible for employment as hospital attendants during the voyage will also be stated. This return will be furnished in duplicate—one for the Commanding Officer, and one to accompany the invalids to Netley.

603. Paragraphs 38, 39, 40, 41 and 45 of Section 20, Queen's Regulations and Orders for the Army, 1873, are here republished for the information of Medical Officers:—

Arrival of invalids at Netley.

" . The Commandant at Netley is responsible that invalids arriving at that hospital are, as early as possible, brought forward for discharge. If, after being medically inspected, they are reported by the Principal Medical Officer to be unfit for further military duty, the discharge documents are to be completed and transmitted to the Adjutant General for confirmation. Such men as are found fit for further service are to be sent forthwith to their respective depôts."

Settlers at foreign stations.

" . In cases where soldiers on foreign stations are proposed for discharge as invalids, and have received permission from the local authorities to be discharged on the spot, the General or Officer Commanding is to forward their discharge documents, including the parchment certificate, to the Adjutant General, in a covering letter, for the consideration of the Chelsea Board."

Bonâ fide disability necessary for invaliding.

" . None but soldiers *bonâ fide* disqualified by actual disability—without regard to the length of their service—are to be brought forward for discharge as unfit for service. Medical Officers will be held responsible for the proper discharge of their duty in this respect."

Soldiers in hospital.

" . Men under treatment in hospital, and unfit to be removed therefrom, are not to be brought forward for discharge."

Insane soldiers.

" . The following instructions are to be observed in dealing with insane soldiers:—

"(*a.*) An insane soldier, whether at home or abroad, should,

INVALIDING OF SOLDIERS—*continued.*

as a rule, be attended, for one month at least, by the Medical Officer who has been accustomed to treat him, as such Medical Officer, from knowing the probable origin and causes of the attack, is considered the most competent to treat the disease in its earlier stage.

"(*b.*) If, after such period of treatment, the patient should not recover, or, if in consequence of exceptional circumstances which do not admit of delay, it be desirable to remove him, application should be made by the Medical Officer in charge to the Director General, if at home, or to the Principal Medical Officer, if abroad, for permission to transfer the insane soldier to a general military hospital, or to any other establishment in which lunatic wards exist. In the latter case, if it be a private asylum, or other asylum unconnected with the War Department, no order for the admission should be given without previous authority from the Secretary of State for War, or if abroad, from the General Officer Commanding.

"(*c.*) Such applications should be accompanied by an abstract of the case, drawn up in accordance with the instructions laid down in the 'Medical Regulations,' together with a copy of the soldier's medical history-sheet, and a statement of the reasons which induce the Medical Officer in charge of the case to believe that, if discharged, he will not be able to re-enter the service. On receipt of the documents by the Director General, if at home, or by the Principal Medical Officer, if abroad, the necessary Instructions will be issued for the disposal of the case.

"(*d.*) Insane soldiers at home are not to be brought before an invaliding medical board, or removed to a general military hospital, or to an asylum, until the necessary sanction, as prescribed in (*b*), has been obtained."

604. The detailed information to be supplied in cases of mental disability, is as follows:— Information required in cases of mental disability.

1st. Name. Regiment. Regimental No.
2nd. Age. Length and places of service.
3rd. Place of birth. Names and residences of nearest surviving relatives.
4th. Social state, married or single.
5th. Temperament.
6th. Character, especial regard being paid as to whether temperate or otherwise.
7th. Form of mental disorder.
8th. Whether a first attack?

INVALIDING OF SOLDIERS—continued.

9th. Duration of present attack.

10th. Whether the attack was sudden or insidious? If the latter, mention any peculiarity of behaviour or change in habits which preceded it.

11th. Whether insanity was preceded or accompanied by any particular illness, as fever, rheumatism, syphilis, &c.?

12th. What are the supposed causes (moral or physical) of the attack? Whether the patient has suffered from sunstroke, concussion, or injury of the head?

13th. Whether any hereditary predisposition exists?

14th. What are the particular ideas or actions which have induced the belief of insanity?

15th. Whether the disease is complicated with epilepsy or paralysis, with homicidal or suicidal impulses? If suicidal tendency exists, mention the way in which self-destruction has been attempted.

16th. Whether the patient is noisy, dangerous, mischievous, or given to steal? Whether his habits are cleanly or dirty?

17th. What treatment has been adopted since invasion of disease?

In designating the particular form of mental unsoundness that the patient labours under, the nomenclature of diseases laid down by the College of Physicians will be strictly adhered to.

Insane soldiers discharged locally.

605. Whenever it may be deemed advisable to discharge locally soldiers suffering from mental disease who are not dangerous to themselves or the public, the Medical Officer will first take steps to ascertain through the military authorities, whether in the event of discharge, the friends are willing to receive the sufferers, as, failing the friends, the parochial authorities must take charge of them. [*See* 92nd Section of the Mutiny Act.]

606. The usual documents, with the reply of the friends, will then be forwarded to the Director General, with a letter applying for permission to bring such cases before a district invaliding Board.

Precautions to be taken on the removal of invalids.

607. When insane soldiers are discharged from hospital, they will be removed in the presence of a Medical Officer, and care will be taken that they are dressed with due regard to health and comfort.

608. Insane soldiers transferred from one hospital to another, or sent to their friends, will be accompanied by an escort, consisting of not less than one non-commissioned officer and two men, and application for the escort will be made to the Military Authorities.

INVALIDING OF SOLDIERS—continued.

609. The insane wives of soldiers will on arrival from foreign stations, be immediately sent to their parish, and placed under the care of the parochial authorities. Pending these arrangements being carried out, the Principal Medical Officer will make local arrangements for their safety and care, after reference to the General Officer Commanding.

610. When invalided Officers or soldiers not in charge of an Army Medical Officer, are embarked on board any vessel a Medical Officer will be detailed to accompany them on board, and to explain the nature of their cases to the Commander and Surgeon of the vessel. **Invalided Officers or soldiers.**

611. When insane Officers or soldiers are to embark on board any Royal Mail Steamship, communication will be made to the agents as soon as possible, and the insane patients will, whenever practicable, be accompanied on board the ship by a Medical Officer, who will explain the case or cases to the Commander and Surgeon of the ship. **Insane Officers or Soldiers.**

612. When men are sent from out-stations to head-quarters to be invalided, they will not be shown as transfers from one hospital to another, unless at the time of transfer they are under treatment in hospital.

PART 5.—SANITARY REGULATIONS.

I.—General Sanitary Duties.
II.—Personal Hygiene of Troops.
III—Vaccination.
IV.—Precautions in Barracks, Quarters, and Hospitals.
V.—Infectious Diseases.
VI.—Garrisons, Camps, and Stations.
VII.—Movements of Troops by Sea.
VIII.—Service in the Field.
IX.—Books, Returns, Correspondence, &c.

SECTION I.—GENERAL SANITARY DUTIES.

Sanitary duties of the Army Medical Department.

613. The Officers of the Medical Department of the Army are charged not only with the medical care of the sick, but with the duty of recommending to Commanding Officers, verbally or in writing, whatever precautionary measures as to barracks, encampments, garrisons, stations, hospitals, transports, diet, dress, as authorised by Regulation, drills, and duties may, in their opinion, conduce to the preservation of the health of the troops, and to the mitigation or prevention of disease in the army. In the event of any verbal representation not being complied with, the Medical Officer will make a representation in writing on the subject to the Commanding Officer forwarding copies of the correspondence to the Principal Medical Officer.

SECTION II.—PERSONAL HYGIENE OF TROOPS.

614. Medical Officers will inspect the men under their charge weekly for the detection of itch, cutaneous complaints, ocular disease, ulcers, and any ailments indicated by the countenance or skin, as fever, small-pox, scurvy, &c.; and will immediately adopt such precautionary measures as may appear to be requisite. Men with itch will, if possible, be placed in a separate room, or in a tent, when the season will permit. Periodical inspection for detection of disease.

615. On the first arrival of troops at stations in the United Kingdom to which the Contagious Diseases Act applies or on their return from furlough, and also on disembarkation at any colony where there is a local ordinance or law in force for the prevention of venereal disease, they will be examined with a view to prevent the introduction of such disease. Medical Officers will be careful to bring to the notice of the Commanding Officer any men who have delayed reporting themselves when diseased. Venereal disease.

616. The Medical Officer will satisfy himself that the personal cleanliness of the men is properly attended to. Personal cleanliness.

617. He will visit periodically all grounds or places set apart for the physical training of the troops, or for games or amusements, and will give his advice on such matters, and also on the kind and amount of gymnastic exercises best suited to improve the health of the men. Gymnastics and games.

618. He will, from time to time, examine the quality of articles of food and drink sold in the canteens, as well as the ventilation of the canteens themselves. He will examine the cooking, and ascertain whether it be sufficiently varied; likewise the quality and amount of drinking water. He will also ascertain whether wells and other sources of water are protected from soakage from latrines, cesspools, drains, and other causes of impurity. Cooking, &c.

SECTION III.—VACCINATION.

Vaccination. Small-pox. Re-vaccination.

619. The Medical Officer will report yearly (on W.O Form 298 A) whether every man, woman, and child belonging to the regiment bears unequivocal marks of either small-pox or cow-pox; and will keep a register, W.O. Books 28, and 28 (*a*) of the names and appearances, on the days of examination, of all patients vaccinated. At all stations where fresh virus can be procured, every doubtful case, not only of soldiers, but of their wives and children, will undergo re-vaccination.

Inspection and re-vaccinate during prevalence of small-pox.

620. Whenever small-pox is prevalent, Medical Officers in charge of corps or detachments will exercise more than ordinary care and attention in regard to the condition of vaccination among the troops, their wives and children, and for that purpose they will make a careful inspection of every individual, and at once resort to the operation of vaccination or re-vaccination, not only wherever the marks of vaccination are unsatisfactory or indistinct, or a long period has elapsed since the date of the operation, but wherever previous re-vaccination has been unsuccessful.

Special report of cases of small-pox, in the weekly return.

621. Any cases of small-pox will be immediately reported to the Director General in a special report, specifying the name and age of each individual, with the dates of the operations of vaccination and re-vaccination, with their results respectively, and whether such individual bears satisfactory marks, and the number thereof. All such cases of small-pox will also be invariably noticed in the remarks appended to the Weekly Return of Sick.

Special note of those not bearing marks of vaccination.

622. If the patient be a soldier, and no marks of vaccination exist, the fact will be mentioned in the said report, with a statement showing the date of his joining the corps.

Recruits to be vaccinated.

623. Every recruit, without exception, will be vaccinated on joining the head-quarters or depôt of the corps to which he belongs, unless the operation is certified to have been already successfully performed subsequently to his enlistment.

Record in medical history sheets.

624. The Medical History Sheet of every soldier will furnish information whether he has been re-vaccinated, and Medical Officers will re-vaccinate those cases where no such record exists: and where the Medical History Sheets contain no place specially set apart for it, the date and result of the operation will be inserted in red ink in the body of the sheet, after the last entry of treatment for disease.

VACCINATION—continued.

625. Medical Officers will re-vaccinate the wives of all soldiers married with leave, and, as far as possible, this course will be pursued, as a measure of public safety, in the case of the wives of soldiers married without leave; and all soldiers' children will, as a rule, be re-vaccinated wherever 10 years have elapsed since the date of their having been vaccinated. Re-vaccination of soldiers' wives. and children periodically.

626. The direct method of vaccination will be had recourse to whenever practicable, in preference to that by lymph from tubes or points; it being understood, however, that in vaccination from arm to arm, or in re-vaccination, the lymph is not to be taken from adults nor from a re-vaccination. Direct method of vaccination and source of lymph.

627. When re-vaccination has failed, Medical Officers will repeat the operation with lymph from another source when practicable, and in the event of the operation still proving unsuccessful, the names of the individuals will be recorded, with a view to their being re-vaccinated at some subsequent date. Cases of failure.

628. In re-vaccination Medical Officers will not make the necessary punctures in less than two places, and where the evidence of original vaccination is indistinct, or single, three punctures will be made. Punctures, number of.

629. Vaccination certificates of soldiers' children will not be given to the parents, but transmitted to the Registrars of Births and Deaths. Certificates of vaccination to be transmitted to Registrar,

630. Such certificate will be on the particular Form supplied by the Registrar to the parents on the registration of birth. In order to meet cases in which these Forms may have been lost, the Registrar General has prepared books of certificates for the use of Medical Practitioners, which will be supplied to Medical Officers on application. Forms and books of Certificates.

SECTION IV.—PRECAUTIONS IN BARRACKS, QUARTERS, AND HOSPITALS.

Approval of plan and site of barracks and hospitals.

631. Before any new barrack or hospital is erected, the plans and site will be submitted to the Director General for approval, in so far as regards the healthiness of the locality and of the buildings.

Cubic space to be allowed.

632. The cubic space for men in barracks and huts, under ordinary circumstances, is laid down in that portion of the Regulations for the Commissariat Department [Revised Army Regulations, Vol. IV,] relating to "Barracks and Quarters." Those regulations will not be departed from without authority.

Buildings for hospitals.

633. Before any building is taken possession of for hospital purposes, the Sanitary or other Medical Officer, as the case may be, will, in communication with the Commissariat Officer, or a Board of Officers, if appointed, make a careful sanitary inspection of the building and its vicinity, and note the condition of the former as regards external and internal drainage, water supply, ventilation, limewashing, and general cleanliness, the number of beds the building is capable of containing, the number and size of windows, doors, and fireplaces, the amount of light, the state of latrines, or water-closets, as well as all other matters likely to affect the health of the inmates or the purity of the air in the wards.

Results of the inspection.

634. The Sanitary or other Medical Officer will report to the Commanding Officer the results of his inspection, and make any necessary recommendations for removing defects. In the case of hospitals selected for temporary occupation, the Commanding Officer will, in terms of special authority given him for such purposes, forthwith direct such recommendations to be carried out, unless he disapproves of them, in which case he will state in writing his reasons, and immediately transmit them, with the recommendations of the Sanitary or Medical Officer, to superior authority.

Copies of report to be sent to Principal Medical Officer.

635. The Sanitary or other Medical Officer, as the case may be, will at the same time transmit a copy of every such report to the Principal Medical Officer, stating also the steps taken to carry out his recommendations, and the Principal Medical Officer will forthwith forward every such report to the Director General, with any remarks he may have to make on the same.

Cubic space to be allowed in hospitals.

636. The minimum space to be allowed for each bed in any permanent hospital is 1,200 cubic feet at home and in temperate climates, and 1,500 cubic feet, or as may be specially authorised by the Secretary of State for War in reference to the Commissariat Regulations [Revised Army Regulations, Vol.

PRECAUTIONS IN BARRACKS, &c.—continued.

IV], at stations in tropical climates. When hospitals are not fully occupied, the sick will be distributed so as to give, as nearly as may be, the amount specified. The number of beds which each ward is capable of containing in accordance with these measurements will be painted, as directed by Regulation, outside the door of the ward, and will not be increased without the sanction of the Secretary of State. In detached wooden huts in temperate climates the minimum of space will be 600 cubic feet for each bed, where possible. The number of beds in each hut will, also according to Regulation, be painted on the door.

637. All wards will be sufficiently warmed and lighted, according to the weather and season, as directed by Regulation. Lighting and warming of hospital wards.

638. The Medical Officer will also see that the vicinity of the hospital is preserved in a good sanitary state, that the surface is properly drained and swept daily, that there are no nuisances, that the water supply is good and abundant, that the water-closets and latrines are in an efficient state, that the drainage is not obstructed, that the ventilation of the wards is at all times efficient, that the hospital is kept in a proper state of repair, that the walls are frequently limewashed, and cleansed by scraping if necessary, that the flooring, staircases, &c., are kept clean, and that the floors of the wards are never washed except by the medical officer's special direction. Vicinity, &c. of the hospital.

639. The beds in barracks and hospitals will be placed in accordance with the instructions contained in Section 15, paragraph 6, Queen's Regulations and Orders for the Army, 1873. Distance of beds.

640. The Medical Officer will ascertain whether the number of men in barrack rooms, hospital wards, and guard-rooms is in accordance with the number painted on the door. He will state in his annual report to the Director General what the monthly average cubic space for each man has been. Number of men the same as painted on the door.

641. He will satisfy himself that every barrack, guard-room, and cell is suitably lighted and provided with sufficient means of ventilation to keep the air in a pure state by night as well as by day; that married soldiers' quarters, schools, reading rooms, kitchens, wash-houses, lavatories, urinals, and latrines, are suitably ventilated and lighted; that the means of ventilation provided for any barrack, guard-room, or cell, or for any school, reading-room, kitchen, washhouse, lavatory, urinal, or latrine, are in efficient operation. He will further satisfy himself that the apertures intended specially for ventilation are never allowed to be blocked up; that the windows of every barrack room are opened sufficiently to allow of a free ventilation as soon as the men have risen, and that they are kept open to such extent during the day as the weather and season may admit; that the beds and bedding are freely exposed to the air as laid down in the Queen's Regulations and Orders for the Army, 1873, Ventilation and lighting of barrack buildings. Means of ventilation to be efficient. Apertures of ventilation not to be blocked up. Opening of windows. Beds to be exposed to the air.

Section IV. Precautions in Barracks, Quarters, and Hospitals.

PRECAUTIONS IN BARRACKS, &c.—continued.

Barracks to be lime-washed.

Inspection of quarters in billets.

section 15, par. 6; that the walls and ceilings of barracks or quarters are limewashed in accordance with existing regulations, and that the walls are scraped at intervals.

642. When the regiment is billeted, the Medical Officer will visit the men's quarters to ascertain that they are in a good sanitary condition, and that the men's apartments are sufficiently warmed and ventilated, and not overcrowded; also that the bedding is clean and dry.

Sanitary inspection of barracks and hospitals by Medical Officer.

643. In order to fulfil these duties, the Medical Officer in charge will visit all quarters, guard-rooms, cells, married soldiers' quarters, and every other portion of the barracks at least once a week, to examine their general sanitary condition and cleanliness, in accordance with Section 15, paragraph 10, Queen's Regulations and Orders for the Army, 1873. He will keep notes in W.O. Book 39 of all such examinations, stating whether the results were satisfactory, and recording the defects he discovered and the representations he made, verbally or in writing, to his Commanding Officer, together with the result of such representations.

SECTION V.—INFECTIOUS DISEASES.

644. Hair mattresses, bolsters, and pillows will be used in all hospitals, except for cases of cholera or of diarrhœa when the former disease is prevalent. In such cases it is advisable that the barrack bedding should be used. It should therefore accompany the sick to hospital, and when no longer required for use the straw will be burnt, and the bedding, hospital clothing, and such of the clothing worn by the patients at their admission as is not liable to injury thereby, disinfected by dry heat or by such other means as may be practicable. The articles will then be steeped in boiling water, and afterwards washed with soap and water.

Hospital bedding.

In cholera cases.

645. Such articles of a soldier's kit as cannot be so treated will be removed to hospital and there fumigated, and exposed to the air and sun for a week, beaten, and brushed. When belonging to patients who have suffered from cholera the articles will not be again taken into use until the epidemic has ceased.

Kit of such patients to be fumigated.

646. During the prevalence of cholera, or when an outbreak of that disease is anticipated, Medical Officers will conform to the special instructions on the subject printed in the Appendix No. 14, pages 205 to 211.

Medical Officers to conform to special instructions regarding

647. The following Sanitary precautions will invariably be adopted when infectious fevers or other infectious diseases shall have occurred among the occupants of Officers', Non-Commissioned Officers', or married soldiers' quarters, or in barrack rooms. In cases where hospital bedding, clothing, &c., shall have been used by such patients the instructions contained in paragraph 655 will be observed:—

Infectious diseases.—Sanitary precautions.

648. When a case of scarlet fever occurs in quarters:—

Scarlet fever in quarters.

(*a.*) The rooms will be vacated, and the windows kept open for as long a time as practicable to insure thorough ventilation.

(*b.*) The furniture, floors, and all the painted woodwork will be scrubbed.

(*c.*) The bedding, clothes, carpets, &c., will be thoroughly cleansed and disinfected before further use.

(*d.*) The ceilings will be whitewashed.

(*e.*) The walls, if papered, will be re-papered, the old paper being first carefully scraped off. If not papered, they will be scraped and finished as before.

649. The Medical Officer who may have attended the case, will represent in writing to the Officer Commanding the

Medical Officer to represent

action necessary.

steps required to be taken under sections *a*, *b*, and *c*, paragraph 648.

Officers commanding will give instructions.

650. The Officer Commanding will give the necessary instructions for the performance of the services.

Royal Engineer Department to carry out.

651. The services alluded to in sections *d* and *e*, paragraph 648, will be carried out by the Royal Engineer Department on a certificate in writing from the Principal Medical Officer that a case of scarlet fever has occurred.

Restriction of re-papering, &c.

652. The re-papering, colouring, and whitewashing will be restricted to the room in which the case of fever shall have occurred.

Infectious disease in barracks.

653. Whenever it is considered advisable, in consequence of the occurrence of infectious disease in barrack or quarters, the room will be vacated, thoroughly cleaned, and limewashed, and left unoccupied, with the windows open as long as practicable; and when, in addition, it is deemed necessary in the first instance to fumigate the room, one of the processes detailed for that purpose will be adopted.

Barrack bedding and clothing of patients.

654. Of the barrack bedding used by sufferers from infectious fevers or itch, prior to admission into hospital, the straw will be burnt, and the remainder, together with the clothing belonging to the patients but not actually in use, will, if not liable to injury thereby, be disinfected by dry heat or subjected to the process of boiling when practicable, or be immediately steeped in boiling water, without removal to hospital. The articles will then be handed over to the Commissariat Department for the purpose of being exposed to the air and subsequently washed.

Hospital bedding, &c.

655. Whenever hospital bedding, clothing, &c., have been used by patients affected with fevers of infectious character, they will be treated as follows:—

(*a*.) The hair of the mattress, &c., will be opened out, exposed to the air, and beaten, and, when practicable, submitted to a dry heat of not less than 212° F., for at least two hours; the remainder of the bedding, hospital clothing, and such of the clothing worn by patients at their admission as is not liable to injury thereby, will also be disinfected by dry heat or chemicals, steeped in boiling water, exposed to the air, beaten, and afterwards washed with soap and water. Boiling the articles instead of steeping them in boiling water is preferable when it can be done, in which case, or where dry heat has been employed, disinfection by chemicals will not be necessary.

(*b*.) Such articles of a soldier's kit as cannot be treated in the manner laid down in the foregoing paragraph will be removed to hospital, and there fumigated and

INFECTIOUS DISEASES—continued.

exposed to the air and sun for a week, beaten and brushed.

656. After the occurrence of a case of yellow fever in any barrack abroad, the room or quarter in which the case occurred will be vacated, disinfected, and limewashed. The floors will be well scoured and the paint well washed with soap and warm water. Before the room or quarter is re-occupied, the windows will be left open for as long as practicable, to secure thorough ventilation. Yellow fever in barracks or quarters abroad.

657. When fumigation is considered to be necessary, one of the following processes will be adopted:— Fumigation.

With Chlorine Gas.

a. Take	common salt	4 ozs.
„	oxide of manganese (in powder) ..	1 „
„	sulphuric acid	1 „
„	water	2 „

658. The water and acid to be mixed together, and then poured over the ingredients in a delf basin, which should be placed in a pipkin of hot sand.

With Nitrous Acid Gas.

b. Take	copper shavings	½ oz.
„	nitric acid	1½ „
„	water	1½ „

Pour the acid and water upon the copper in a small jar.

With Sulphurous Acid Gas.

c. Burn two ounces of sulphur in a pipkin.

d. All doors and windows and other openings in the room will be closed before commencing fumigation.

e. The operator will leave the room immediately the process has commenced.

f. At the expiration of from two to three hours all doors and windows will be thrown open, and free ventilation established.

g. Barrack rooms will be entirely emptied before being fumigated.

659. All processes of disinfection and fumigation will be carried out by the subordinates of the Medical Department, wherever the necessary establishment exists. Materials for the above purposes will be obtained from the Commissariat Depart- Disinfection and fumigation, how to be carried out.

ment, and Medical Officers will surpervise the use of chemicals when it is necessary to employ them.

Cleaning rooms prior to re-occupation.

660. If any expense in cleaning quarters or rooms be necessary it will be provided for by the Commissariat Department.

Outbreak of infectious disease.

661. On the outbreak of any infectious disease the circumstances will be immediately reported to the Principal Medical Officer.

Ambulance for cases of infectious disease.

662. When it is necessary to move a case of infectious disease to Hospital, the Medical Officer in attendance will make immediate application to the Commissariat Department for an ambulance to convey the patient to Hospital, at the same time stating the nature and urgency of the case.

SECTION VI.—GARRISONS, CAMPS, AND STATIONS.

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663. In garrisons, camps, and stations, where a special Sanitary Officer has not been appointed, the Principal Medical Officer will perform the duties of Sanitary Officer. Duties of sanitary officer.

664. He will exercise general supervision over the sanitary condition of all parts of the garrison, camp, or station, and its vicinity, as regards drainage, cleanliness, removal of nuisances, water supply, overcrowding, ventilation, limewashing, lighting of barracks and hospitals, the state of latrines, and all other matters affecting the health of the troops. Sanitary state of garrison or station to be supervised.

665. He will represent any defects in the same, together with his recommendations thereon, verbally or in writing, to the Officer Commanding the troops. In like manner the Medical Officer in charge of any regiment or detachment will represent and recommend to the Commanding Officer, verbally or in writing, whatever he may consider necessary for protecting the health of the troops, whether as regards the abatement or removal of local causes of disease, or as to any alteration of diet, clothing, drills, or duties. If any verbal representation is not complied with, the Principal Medical Officer or Medical Officer in charge will make a representation in writing on the subject to the Commanding Officer. Precautions to be recommended to commanding officer.

666. Should any epidemic disease appear in any garrison, camp, or station, the Principal Medical Officer will immediately inquire into its cause, and in communication with the Medical Officers in charge thereof, he will, if necessary, recommend in writing to the Commanding Officer such measures of precaution as may be requisite for mitigating such disease. In the case of regiments or detachments, similar written representations will be made to the Commanding Officer by the Medical Officer in charge. Measures for preventing epidemic diseases to be recommended.

667. Whenever there is reason to suppose that the water supply at any Military Station is of such a character as to be likely to affect the health of the troops, the course laid down in clause 85, Army Circulars, 1876, and clauses 12 and 105, Army Circulars, 1877, relating to the examination of samples of water, will be followed. Chemical examination of water.

668. The occurrence of epidemic disease will be reported to the Director General, and periodical reports will be made during its continuance. Reports of epidemic disease.

Section VI. Garrisons, Camps, and Stations.

GARRISONS, &c.—continued.

Copies of recommendations to be sent to Principal Medical Officer and Director General.

669. Medical Officers in charge will transmit to the Principal Medical Officer in garrisons, camps, and stations, and also to the Sanitary Officer, when an army is in the field, copies of all written recommendations they may have considered it necessary to make for protecting the health of troops. Except when an Army is in the field, they will immediately send copies of such recommendations, stating the results, to the Director General. Whenever Medical Officers deem it necessary to forward any suggestions of a sanitary nature to the Director General they will invariably furnish a copy to their Commanding Officer.

SECTION VII.—MOVEMENT OF TROOPS BY SEA.

670. Every soldier, woman, and child about to embark will be carefully examined by a Medical Officer on the day of departure, or, if the military arrangements will not admit of this, on the day previous, with a view to prevent any individuals showing symptoms of contagious disease proceeding on board ship. All soldiers' families under orders to proceed to a foreign station should be under medical observation for some weeks before embarkation. Every woman, and every child above three months old, must be vaccinated before proceeding to embark, unless already bearing satisfactory marks of vaccination. Soldiers' wives near their confinement (within two months) will not be embarked in Her Majesty's Indian troop ships, or in mail or contract steamers, or other vessels, and the husbands of such women will be detained with them. Preliminary inspection for contagious diseases.

671. When a ship is engaged wholly or partially for the conveyance of troops, the inspections prescribed in Section 17, paragraphs 23 to 28, of the Queen's Regulations and Orders for the Army, 1873, will be held, and the Senior Medical Officer on the spot, and, if practicable, the Medical Officer in charge of the troops, will attend the inspections and report upon the sanitary condition of the ship, and on the arrangements made. When invalids are to be embarked the Senior Medical Officer will satisfy himself that there is a due proportion of Medical Officers according to the number and state of the sick. Preliminary inspection.

672. Should the inspecting Medical Officer discover any defects likely to affect injuriously the health of the troops or the sick during the voyage, he will make his remarks accordingly on the report of inspection; and he will forthwith report the circumstances in writing in such detail as he may consider necessary to the Officer Commanding at the port, transmitting a copy to the Principal Medical Officer on the station, who will forward the same with his remarks to the Director General. Medical Officer to recommend precautionary measures.

673. The Medical Officer in charge of troops and sick will, during the voyage, keep a constant watch over the ventilation and cleanliness of the ship, the cleanliness of the water-closets, the condition of the bilge, and over all other matters likely to affect injuriously the health of the troops or sick [*see* Queen's Regulations and Orders for the Army, 1873, section 17, "*Duties on board ship*"]. Should defects arise in any of these Sanitary duties.

Section VII. Movement of Troops by Sea.

matters, the Medical Officer in charge will immediately represent the same to the Officer Commanding on board, with such recommendations as he may consider necessary for the preservation of health. After troops have been 8 days at sea, or whenever the Medical Officer deems necessary, lime juice and sugar will be issued with the daily ration, according to the scale of victualling which is to be seen on board.

Disembarkation of troops or sick.

674. Medical Officers embarked with troops on board a hired ship deeming it necessary to make any statement animadverting upon the sanitary arrangements, or the supplies on board, will address such report to the Officer Commanding the troops, submitting a duplicate to the Principal Medical Officer at the port of disembarkation. Copies of any adverse remarks embodied in the usual report of sick must also be furnished to the Officer Commanding. The sanitary arrangements on board Her Majesty's troopships rest with the Naval Medical Officer under the Captain, but should the Medical Officer in charge of the troops consider it necessary to make any suggestions on the subject, he will make his report to the Officer Commanding the troops. Whenever scurvy or any infectious disease has made its appearance amongst the soldiers or their families during a voyage, the Medical Officer in charge, on landing, will make a special report of the circumstance to the military and medical authorities at the port of disembarkation.

Venereal disease.

675. Whenever a disembarkation takes place at any colony where there is any law or local ordinance in force for the prevention of veneral disease, the Medical Officer detailed to visit and inspect the vessel will ascertain whether the Medical Officer in charge has inspected the troops with a view to detect and guard against the introduction of these diseases. He will report the results of his inspection of the vessel to the Principal Medical Officer for transmission to the Director General, with the return of sick on board ship, W.O. Form, 294B.

SECTION VIII.—SERVICE IN THE FIELD.

676. Before an Army takes the field the Director General, in addition to the information and advice usually tendered to the War Department on matters connected with the hospital arrangements of the army, will, on the requirement of the Secretary of State for War or the Commander-in-Chief, give his opinion in writing on all matters connected with the country, climate, productions, rations, clothing, shelter, sanitary arrangements and precautions, and on all other matters bearing on the health of the troops. Duty of Director General.

677. The Director General will recommend a competent Medical Officer to be appointed Sanitary Officer, who will be attached to the Quartermaster General's Department of the Army. Director General to appoint Sanitary Officer.

678. The Director General will issue to the Principal Medical Officer of every army on active service such a code of instructions for his guidance on all matters connected with the above, as he may see necessary to meet the specialities of each case. Director General to issue sanitary instructions.

679. The Sanitary Medical Officer will accompany the Quartermaster-General, or such officer as the latter may appoint, in selecting buildings for the use of troops, whether as quarters, hospitals, or stables. He will examine into the sanitary condition of such buildings, as regards cleansing, nuisances, drainage, ventilation, lighting, water supply, limewashing, cubic contents, and into all other matters connected with the buildings likely to affect the health of the troops or of the sick. He will also advise the Quartermaster General, or his deputy, on all such subjects, sending copies of all reports he may have considered it necessary to make to the Principal Medical Officer. He will point out in his reports any defect requiring remedy, and state the number of troops or sick which can be safely accommodated in the buildings. Sanitary Officers to make inspections of buildings and to advise Quartermaster General.

680. The Sanitary Medical Officer will further examine into the sanitary condition of towns or villages about to be occupied, and their neighbourhood; and he will make recommendations for organizing a proper sanitary police, for the preservation of cleanliness and removal of nuisances, as well as for the execution of such measures as he may consider necessary for protecting the health of troops in occupation. Also of towns and villages.

681. Before selecting any site for an encampment the Sanitary Medical Officer will accompany the Quartermaster Inspection of camp sites.

General, or such other officer as the latter may appoint, on his inspection. The Sanitary Officer will give his opinion, in writing, if necessary, on the salubrity or otherwise of the proposed position, with any recommendations he may have to make, respecting the drainage, the preparation of the ground, the distance of tents or huts from each other, the number of men to be placed in each tent or hut; the state of cleanliness of surrounding ground, ventilation, water supply; the position and regulation of latrines and slaughtering places; cleansing and disposal of refuse; burial of the dead and of the carcases of animals.

Water supply.

682. He will, in communication with the Officers of the Quartermaster General's or Royal Engineer Department, examine and report on the amount and quality of the water supply, point out the best sources of supply, and also indicate any precautions required in collecting, storing, purifying and distributing water for use.

Drainage and ventilation of tents

683. A trench will be dug round each tent sufficiently deep to remove surface water and to keep the ground under the tent dry. This will be done in damp or wet ground, even if the ground be occupied only for one night.

and huts.

684. Before erecting huts the ground will be cleared and levelled, and a trench dug round the site of the hut sufficiently deep to drain the site.

685. Huts will not be dug out of the ground nor have earth heaped against their sides; they will stand detached and at a sufficient distance from each other, and from any neighbouring higher ground, to allow a free circulation of air around them. In warm climates the floor will be sufficiently raised above the ground to allow of a free circulation of air beneath. The Sanitary Officer will be consulted on these points, also as regards the drainage of sites, and the warming and ventilation of huts and tents.

Sanitary Officer to superintend sanitary arrangements.

686. The Sanitary Medical Officer will superintend the sanitary arrangements of the camp and of occupied towns. He will see that the surface and vicinity of camps and towns are kept clean and free from nuisances; that defects of the surface drainage are remedied; that the dead are properly interred, and the carcases of animals and offal properly buried or otherwise disposed of; that latrines are properly regulated; and that the water supply is preserved in a state of purity.

To recommend precautions for preventing disease.

687. He will inform himself as to the sanitary condition of hospitals, huts, tents, houses, and other buildings, in occupation, and will recommend, in writing, if necessary, such precautionary measures for the prevention of disease as he may think fit, as regards cleansing, draining, prevention of overcrowding, ventilating, lighting, limewashing, removal of nuisances, improvement in water supply, and all other local matters affecting the health of the troops or the sick.

SERVICE IN THE FIELD—continued.

688. The Sanitary Officer will report to the Quartermaster General any defects or negligence in carrying out the duties of the Camp Police.

689. The Principal Medical Officer of every army in the field will give advice, in writing, to the Commander of the Forces, in reference to the composition of rations, clothing, shelter, sanitary arrangements, as authorised by Regulation, and precautions for preventing disease, and on all other subjects bearing on the health and physical efficiency of the troops.

Principal Medical Officer to give advice to Commander of Forces.

690. The Principal Medical Officer or Sanitary Officer of every army in the field will, with the sanction of the Commander of the Forces, immediately on the opening of a campaign, as well as at such other times as may appear to him to be necessary, issue such instructions regarding sanitary precautions for protecting the health of the troops as he may consider requisite for the guidance of the Medical Officers.

Principal Medical or Sanitary Officer to issue sanitary instructions.

691. The Sanitary Officer will keep up a daily inspection of the camp, and will especially inform himself as to the health of the troops. Immediately on being informed of the presence of disease he will examine into the cause of the same, whether it proceeds from, or is aggravated by, defects in cleansing, drainage, nuisances, overcrowding, defective ventilation, bad or deficient water supply, dampness, marshy ground, or from any other local cause, or from bad or deficient food, intemperance, unwholesome liquors, fruit, defective clothing or shelter, exposure, fatigue, or any other cause.

Prevention disease.

692. He will report immediately to the Quartermaster General on such causes, and the measures he has to propose for their removal, sending a copy of all such reports to the Principal Medical Officer of the Army. He will also daily report on the progress or decline of the disease, and on the means adopted for the removal of its causes, until it is no longer necessary to do so.

693. When troops are on the line of march the Sanitary Officer, the Principal Medical Officer, or any Medical Officer appointed by him specially for such duty, or the Medical Officer in charge of a regiment, as the case may be, will accompany the Quartermaster General or the Officer acting under his orders, and collect as much information as possible as to the medical topography of the district, with special reference to places which ought to be selected or avoided for camping ground.

Sanitary regulations for troops on march.

694. During epidemic seasons he will also indicate the best means of mitigating or preventing attacks of disease on the march.

695. Troops, before proceeding on the march, will be supplied with some refreshments, especially during epidemic seasons.

Refreshment for troops before a march.

696. The Principal Medical Officer of every army in the field will send to the Director General, at such intervals as the Director General may determine, full information on all subjects

Principal Medical Officer to

report to Director General.

connected with the hygiene of the army, together with such recommendations for improving this service as may be considered requisite.

Medical Officers to report.

697. All Medical Officers in charge of general hospitals, divisions, and brigades in the field will transmit to the Principal Medical Officer of the army, for the guidance of the Sanitary Officer, full information as to the sanitary state of the troops and hospitals, and on all matters affecting the health and physical efficiency of the men, at such intervals as the Principal Medical Officer may appoint.

Sanitary Officers to report.

698. Sanitary Officers attached to an army in the field, or to any general hospital at the base of operations, will draw up a weekly sanitary report on the state of the army, or hospital, to be sent to the Principal Medical Officer of the Army, for the information of the Commander of the Forces. A copy of the report will be transmitted by the Principal Medical Officer immediately to the Director General.

SECTION IX.—BOOKS, RETURNS, CORRESPONDENCE, ETC.

699. When any epidemic disease prevails among the civil population of any garrison, station, or camp, or the neighbourhood thereof, a report or memorandum will be forwarded weekly with the weekly returns of sick to the Director General by the Medical Officer in charge. Reports of epidemic disease in a garrison.

700. When any infectious or unusual disease is prevailing among the troops or their families, either at home or abroad, or where there are any exceptional circumstances which, in the judgment of the Medical Officer in charge, require to be communicated to the Director General, he will forthwith notify the same through the Principal Medical Officer, and continue to furnish a daily report on the progress of the disease and the sanitary state of the troops as long as may be necessary. It will not, however, be requisite under ordinary circumstances to report the occurence of every case of infectious disease by letter, as the weekly return on W. O. Form 1,033 will suffice for that purpose. This return (W. O. Form 1,033) will be forwarded weekly by the Principal Medical Officer during the prevalence of epidemic disease; when more than one disease prevails epidemically at the same time, separate returns relative to each will be furnished; these will be discontinued after an interval of three weeks from the last admission. Epidemic diseases among troop

701. Every Medical Officer or civilian medical practitioner in charge of troops within the United Kingdom, or of a military prison, station hospital, hospital for women and children, or military educational establishment, will furnish a quarterly "*Sanitary Report*," on W.O. Form 463, made up to the last Friday of each quarter, to the Principal Medical Officer of the district, who will transmit the report forthwith to the Director General with a summary, on the same form, made up in his own office. In the event, however, of there having been any cases of infectious disease, any undue prevalence of disease, or any defects of an insanitary kind, Officers in medical charge will, for the time being, send in the Sanitary Report at the end of the month, as has been the practice heretofore. Quarterly Sanitary Report hom

702. On the foreign stations such sanitary reports will be furnished to the Principal Medical Officer of the command, and he will forward to the Director General, a general quarterly "Sanitary Report," on W.O. Form 463, which will embrace all the reports of the Medical Officers under his superintendence. Report abroad.

703. Both at home and abroad the Principal Medical Officer's quarterly "Sanitary Report" will be accompanied by a Distribution Return.

Section IX. Books, Returns, Correspondence, &c.

BOOKS, RETURNS, &c.—continued.

Return showing the Distribution of the Troops and of the Sick on W.O. Form 464.

Sanitary note-book.

704. W.O. Book 39 will be used as a note-book, vide paragraph 707.

Meteorological Return.

705. At every station where there are meteorological instruments the Senior Medical Officer (who is responsible for the care and accuracy with which all observations are taken and recorded), will furnish monthly to the Director General a Return of the "Meteorological Observations taken," on W.O. Form 848; and yearly a List of Meteorological Instruments on a lithographed form, which will be supplied by the Director General.

Sanitary Reports.

706. The Principal Medical Officer will refer in his Annual Return of Sick (W.O. Form 298) to the manuscript reports of the Medical Officers who may be specially appointed to take charge of the sanitary arrangements at Stations, and also to those furnished by the Medical Officers in charge of the Station Hospitals. He will be careful to specify whether he concurs in the statements made in such reports, and will comply with the instructions laid down in Part 6, Section IV, of these Regulations. A copy of the remarks on Sanitary Conditions on page 11 of W.O. Form 298, will be furnished to the General Officer Commanding.

Annual Sanitary Report.

707. The Medical Officer specially appointed to take charge of the sanitary arrangements at a Station, will furnish to the Medical Officer in charge of the Station Hospital a manuscript annual report thereon stating such leading sanitary improvements as may have been effected in the course of the year in respect of cubic accommodation in barracks, in the ventilation of barrack-rooms, huts, &c., the increased facilities for ablution; extended means for variety of cooking; alterations in the soldiers' diet; and such improvement as may from time to time take place in the clothing of the troops with reference to the climate of the station and season of the year. Any more effective drainage of camps and barracks that may have been carried out, and also the condition of the drainage in their neighbourhood, should be stated, and wherever gymnasia exist the effect of the training on the health of the troops should also be stated.

708. The Medical Officer in charge of the Station Hospital will also furnish in the manuscript report, special remarks on the size, site, &c., of the hospital, the number, the accommodation, and the general sanitary condition of the hospital buildings, and other details contained in the above paragraph which may refer to hospitals.

Subjects to be included in Report.

709. In the preparation of the foregoing reports the abovementioned Medical Officers will be guided generally by the outline of subjects laid down in the Appendix No. 15, at pages 212–214.

Register of vaccination and small-pox.

710. W.O. Books 28 and 28A will be used as a register of vaccination and small-pox.

PART 6.—STATISTICAL REGULATIONS.

I.—General Instructions.
II.—Weekly Returns.
III.—Monthly Returns.
IV.—Annual Returns.
V.—Returns for Troops at Sea.
VI.—Returns for Troops on Active Service.
VII.—Returns for Troops in Camps of Exercise, &c.

SECTION I.—GENERAL INSTRUCTIONS.

All cases of sickness to shown.

711. All cases of sickness will be shown in statistical returns, whether the men are treated in dieted or in non-dieted hospitals, or owing to local circumstances, are under treatment in barracks. Care will be taken that sick men received from other hospitals, or from on board ship, and invalids sent from their regiments to the Head-Quarters of the District for further treatment, are not entered in any returns as fresh admissions, but as transfers, in the proper column.

Transfers.

Doubtful cases.

712. A case which, owing to the obscurity of the symptoms, cannot at the time be entered under any specific disease will be recorded in the Weekly Return, as "not yet diagnosed." It will be specially noticed in the remarks so long as it is thus recorded, when the disease is ascertained, the case will be entered as a fresh admission, its disposal being noticed in the remarks.

Nomenclature of diseases.

713. The diseases will always be designated by the terms used in the English list of the nomenclature of diseases, a copy of which has been issued for the personal use of each Medical Officer. This copy of the nomenclature will accompany the Officer wherever he may be serving, and will not be accounted for in any Transfer Return. At certain of the larger hospitals a copy of the nomenclature has been issued marked "for stational use at————," and bearing a number which must be quoted in all Transfer Returns, when the records of the station are handed over from one Medical Officer to another.

SECTION II.—WEEKLY RETURNS.

Mode of rendering.

714. A Weekly Return of Sick, on W.O. Form 294, made up to 12 o'clock (noon) each Friday, will be rendered to the Director General of the Army Medical Department, by the Medical Officer in charge of every hospital, whether it is a general or station hospital, or a non-dieted hospital; where there is only one Medical Officer at a station, this return will be completed in all its details by him. Each return will contain the details for seven complete days irrespective of the date on which the year may close.

Statement of daily strength to be sent, Medical Officers.

715. Arrangements will be made with the Officer Commanding, that a statement of the daily strength of each Corps be sent to the Medical Officer in charge of the station hospital not later than 3 p.m. each Friday afternoon; and this statement will include the strength of all effective troops at outlying stations, whose sick are sent to the hospital for treatment.

Sick of troops detached.

716. Should the sick of troops detached at small outstations, or of detachments at musketry practice, at great gun drill, or of troops employed on any other duty at a station where no military hospital is opened, be received into a station hospital, they will be duly included in its Weekly Return of Sick, care being taken to note the average *Weekly* effective strength of such troops in the return. Decimals or fractions will not be used in the Weekly Returns, but the average strength will be stated in the nearest whole numbers.

Weekly returns to be sent to London.

717. Weekly Returns of Sick will be forwarded direct to London, except only in certain garrisons where local instructions are issued on the subject by the Principal Medical Officer. These Returns will invariably be posted each Saturday afternoon.

Duplicate of weekly returns.

718. The duplicate copy of the Weekly Return of Sick which is forwarded to the Principal Medical Officer of the District, will be marked in red ink with the words "original copy sent to Director, General, Army Medical Department, on _____."

Details to be furnished to Medical Officer in charge of station hospitals.

719. When a Medical Officer is specially appointed to discharge any of the following duties—(*a*) Medical charge of the Troops; (*b*) Sanitary duties; (*c*) Medical attendance on Officers, Women, and Children—he will furnish to the Medical Officer in charge of the station hospital, not later than Saturday morning in each week, all details appertaining to those duties required to

WEEKLY RETURNS—continued.

complete the Weekly Return of Sick, together with any necessary remarks in manuscript, both of which will be copied into the Weekly Return of the station hospital.

720. Invalids arriving from stations abroad will not be shown in the Weekly Return of the hospital in which they are treated, but the records of their sickness will be kept distinct from those of troops serving at home, and a separate Weekly Return, headed "Invalids from Abroad," will be furnished for them, and they will be considered as invalids until they are disposed of in one of the following ways:— Invalids from abroad.

(*a.*) By discharge from the service;
(*b.*) By death;
(*c.*) By return to duty as effective men.

Men sent on sick furlough will on their return be again included among the foreign invalids at the station until they are disposed of. Invalids on their way home, who may be landed at any Foreign Station for treatment, will be similarly accounted for. Men on sick furlough. Invalids landed at Foreign stations.

721. At stations abroad, the Weekly Return of Sick will be sent to the Principal Medical Officer of the Division, or Command. Separate returns will always be furnished for White, and for Black, or Colonial troops. Weekly returns of sick abroad.

722. In the remarks appended to the Weekly Return of a Hospital, the Medical Officer will notice the more important diseases, especially infectious fevers, shown on page 1 of W.O. Form 294, and describe their distribution amongst the different corps sending sick to the hospital. Important diseases to be noticed.

723. Full details of the appearances found at the *post-mortem* examination will be given on page 4 of the Weekly Return in which a death is reported, but if the examination cannot be made in time, the particulars will be given in the Weekly Return for the following week. In such instances, however, immediately on completion of the *post-mortem* examination, a special statement of the results ascertained will be forwarded to the Director General, headed, "*Post-mortem* Examination of the body of _____ of the _____ regiment, to complete the Weekly Return of Sick of the _____, for the week ending _____ 18 ." *Post-mortem* examination.

724. The statistics of the sickness of any non-commissioned officers, or men of the Militia, Pensioners, Yeomanry, Volunteers, Royal Marines, Seamen of the Royal Navy, Government Labourers, or others, who may be under treatment in a military hospital, will not be included with those of the Regular troops, but will be shown in the special table on page 4 of the Weekly Return. If the non-commissioned Officers or men, exceed fifty in number, a separate Weekly Return on W.O. Men not of the regular forces.

WEEKLY RETURNS—continued.

Form 294 will be rendered, the heading of the return being suitably altered.

Erroneous designation of disease.

725. When it is found that the disease of a man admitted into hospital in a preceding week has been wrongly diagnosed, the case will be entered in the proper column of the Weekly Return as "discharged otherwise," and a fresh entry will be made for it in the column for admissions. No second entry for this case, however, will be made in the Admission and Discharge Book of the Hospital, but the first and erroneous designation of the disease will be crossed out, and the correct one inserted above it in red ink. This will prevent two admissions for the same illness appearing in the Annual Return.

Fresh disease supervening.

726. Should another disease supervene on that for which a man was admitted, the original case will be shown in the column for "discharged otherwise," and a fresh admission for the new disease will be made both in the Return, and in the Admission and Discharge Book of the Hospital. Every such instance will be noticed in the remarks on page 4 of the Weekly Return.

Special Reports.

727. Medical Officers need not report specially on the state of either troops or barracks unless unusual sickness, that is in amount, or importance from its special nature, occurs in the former, or the sanitary state of the latter is unsatisfactory. Should either of these circumstances occur, the Medical Officer in charge will report it in writing through the Surgeon Major in charge of the station hospital, to the Principal Medical Officer of the District, in order that it may be recorded by the former with his remarks on the next Weekly Return, and by the latter in his Sanitary Report of the District.

SECTION III.—MONTHLY RETURNS.

Monthly Returns.

728. Principal Medical Officers abroad will furnish to the Director General a Return of Sick on W.O. Form 892, for a period of four or five weeks (as the case may be) ending on the last Friday of the month. The return will be forwarded not later than by the first mail which leaves the Command after the 15th of the month following that to which it refers, except in the Bengal, Madras, and Bombay Commands. It being of importance that the latest information respecting the health of the troops in every Command should be in the possession of the Director General, a special letter, explaining the reasons of the delay, must be sent whenever this return is not forwarded at the proper time.

SECTION IV.—ANNUAL RETURNS.

Annual Returns.

729. Every Medical Officer in charge of a hospital on the 31st of December, will furnish an Annual Return of Sick on W.O. Form 298 A, for the period from 1st January to 31st December. As the permanent records of the sickness of the Army will be contained in these returns, the responsible Medical Officers should endeavour to make them as accurate as possible in every particular. The fact of an admission for illness having been recorded under a certain disease in a Weekly Return, should not prevent a necessary correction being made in the Annual Return, wherever the Medical Officer has reason to believe that the first recorded diagnosis was incorrect.

Cases to be classified.

730. No admission will appear in an Annual Return of Sick as "Not yet diagnosed," as sufficient time will always have elapsed between the date of admission of a case of illness of an obscure nature, and the completion of the Annual Return, to ascertain the disease with exactness, or to class the case as one of "No appreciable disease," should observation justify the use of this term.

Average daily sick, how calculated.

731. The average number of daily sick will be obtained by adding up the number of days each man was under treatment, and dividing the total by 365, or 366 for leap-year; the number of days during the current year on which every patient was under treatment will of course be included.

Return to be furnished when hospital is closed.

732. The Medical Officer in charge of any hospital which may be closed in consequence of the removal of the troops from the station, will transmit, through the Principal Medical Officer of the District to the Director General a return, on W.O. Form 298 A, showing the sickness and mortality from 1st January to the date on which the hospital was closed.

Mode of compiling annual return.

733. In the Annual Return from pages 1 to 9, the statistics of all the sick of the Regular troops only who have been under treatment during the year will be included. Under the head of "Invalids" only such men will be included as are sent for invaliding from the troops serving at the station. Any men not belonging to the Regular Forces, admitted to hospital will be shown in the separate Return, No. 13, on page 10.

Date of forwarding annual return.

734. The Annual Return will be forwarded to the Principal Medical Officer of the District at home, or of a Command abroad, not later than the 31st of January of the succeeding year.

MONTHLY RETURNS—continued.

735. The statistics relating to the sickness of invalids, not belonging to the District or Command, or those of sick men casually left in a Command, will not be included in the Annual Return, pages 1 to 9, but will be shown in the Special Return, No. 14, on page 10.

Special cases.

736. Medical Officers will severally prepare the portions of the annual manuscript report which refer to their particular duties, and furnish the same to the Medical Officer in charge of the hospital, who will attach them to his annual report on prevailing diseases. Any Medical Officer quitting his station after 31st December, will, before he leaves the station, hand over the report on the special duties entrusted to him.

Manuscript reports.

Of Recruits.

737. Where there is only one Medical Officer at a station, he will furnish the Annual Return of Recruits, W.O. Form 1038; but when a Medical Officer is specially appointed to recruiting duty he will prepare the Annual Return of Recruits, and send it to the Medical Officer in charge of the hospital, for transmission with his Annual Return of Sick.

Annual Return of Principal Medical Officers.

738. Principal Medical Officers will compile, on W.O. Form 298, from the Annual Returns of the Hospitals (which will be forwarded to the Director General with the General Return), the more important details into an Annual Return of the Troops in the District, or Foreign Command, and add thereto a manuscript report on the prevailing diseases (taking as a guide the last published Army Medical Department Volume), in which they will elucidate the matters affecting the health of the troops, by suitable remarks. A copy of the Remarks on Sanitary Conditions on page 11 of W.O. Form 298, Annual Return of Sick, will be furnished to the General Officer Commanding.

Invalids at home.

739. The Principal Medical Officer of a District at home, will furnish annually three separate Returns of Invalids on W.O. Form 1067, for the period from 1st January to 31st December, including (*a*) all non-commissioned officers and men invalided from regiments, &c., serving at home; (*b*) all men invalided from the depôts of regiments, &c., which are serving abroad: and (*c*) invalids who returned from Commands abroad, and were discharged the service during the year, not having served at the depôts as effective men after their return. Non-commissioned officers and men, sent home from abroad as invalids, will be so considered until disposed of (*a*), by return to duty as effective men (*b*), by discharge from the surface, or (*c*) by death. Invalids from abroad, sent on sick furlough, will on their return be still considered as foreign invalids, until finally disposed of in one or other of the methods stated above.

SECTION V.—RETURNS FOR TROOPS AT SEA.

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740. Medical Officers in charge of troops at sea, on the completion of the voyage, will furnish a Return on W.O. Form 294B, for the period from the day of embarkation to that preceding disembarkation. If troops are disembarked at more than one place on the same voyage, the dates, and other particulars, will be specified in the columns for that purpose on page 3 of the form. A separate Return will be furnished for invalids, when embarked in the same ship with effective troops, or time-expired men. Statistical Returns for troops at sea

741. Medical Officers in charge of troops on board ship, whether time-expired men, or invalids, will be careful to return as admissions, all cases of sickness occurring amongst the non-commissioned officers and men which, if treated on shore, would be entered in the Admission and Discharge Book, and in the Weekly Return of Sick, &c. The sickness of all men attending hospital for more than one day, will thus always be shown in the Returns. Cases to be returned as admissions.

742. Medical Officers who may have charge of troops embarked on board Her Majesty's ships when they are not accompanied by an Officer of the Army Medical Department (under the instructions in General Order 66 of 1877), will, on arrival at the port of destination, forward to the Principal Medical Officer of the command, the usual Return on W.O. Form 294B, which will be issued, for that purpose, at the port at which the troops embark. Troops on board H.M. Ships.

SECTION VI.—RETURNS FOR TROOPS ON ACTIVE SERVICE.

Statistical Returns for troops on Active Service.

743. Each Medical Officer in charge of a hospital, whatever may be its designation, will furnish a Weekly Return, on W.O. Form 294A, to the Principal Medical Officer, to commence on the day the troops take the field, and continue to furnish it until the operations are terminated, or until the force is broken up. A copy of this Return will invariably be sent, by the Medical Officer, direct to the Director General of the Army Medical Department, through the most expeditious channel.

Daily state of sick.

744. The Principal Medical Officer of the force, will prepare a daily state of sick on W.O. Form 6, and transmit the same regularly to the Military Authorities.

Monthly return.

745. From the date of taking the field, to the end of the operations, the Principal Medical Officer will furnish to the Director General, a Monthly Return on W. O. Form 892, for the whole force.

Return to be furnished after an action.

746. The Medical Officer attached to a corps or detachment, will forward to the Principal Medical Officer, as soon as possible after an action, a nominal return of Officers, Non-commissioned officers and Men, who have received wounds, or injuries in battle. In this return the kind of wound received, and its degree of severity, will be described as tersely and as accurately as possible.

Classified return of wounds and injuries received in action.

747. A classified return of wounds and injuries of every kind received in action, for which men have been admitted into hospital, will be made up on W.O. Form 151A, and will be transmitted every week by the Medical Officer in charge of each hospital, to the Principal Medical Officer. Separate forms will be used for Officers, and for Non-commissioned officers and Men.

Army in the field.

748. The Principal Medical Officer of an army in the field, will furnish to the Director General a special Return, exhibiting the sickness, casualties in action, invaliding, and other loss accruing to the force during its employment, from the commencement, to the termination of the field service. In this Return he will embody the statistics furnished to him on W.O. Form 151A; and in the tables on page 2 of the Weekly Return, W.O. Form 294A.

Casualty return.

749. The Principal Medical Officer of an army in the field, on the termination of the service, will furnish a general casualty return on W.O. Form 298.

SECTION VII.—RETURNS FOR TROOPS IN CAMPS OF EXERCISE, ETC.

Statistical Returns for troops in Camps of Exercise, &c.

750. When a body of troops is brought together as a separate command, in a Camp of Exercise, for Autumn Manœuvres, or other service in time of peace, every Medical Officer in charge of the sick of such troops, at whatever station they may be under treatment, will include the same in his usual Weekly Returns of Sick, but he will in addition furnish to the Principal Medical Officer of the force, a Weekly Return showing the sick of such troops only, on W.O. Form 294A. The sick of the force will be included in the Annual Return of the Hospitals in which they may have been treated.

Special returns on conclusion of camps of exercise, &c.

751. At the conclusion of any of the above-mentioned services, the Principal Medical Officer will furnish to the Director General, Special Returns similar to those specified in paragraphs 748 and 749 for an army in the field.

PART 7.—GENERAL REGULATIONS.

I. Correspondence.
II. Sick Leave and Leave of Absence of Medical Officers, and Reports of arrival and departure.
III. Medical Certificates, and Medical Boards.
IV. Supply of Stationery, W.O. Forms, and Books.
V. Disposal of useless Books and Records.

SECTION I.—CORRESPONDENCE.

Official letters.

752. Official letters will contain full information of all particulars upon the subject to which they relate. Each letter will refer to one subject only, and will be written, when practicable, on foolscap paper, a half to quarter margin being left on the inner side of each page. The paragraphs will be numbered, and the enclosures (if any) described in the margin or on a separate schedule, half a sheet of paper only being used when the letter or other document does not extend over the first page.

Signatures to letters, &c.

753. Signatures to all letters, accounts, and documents, will be written in a clear, legible character, and the official designation of the person signing will be stated; the station and date will also be invariably given.

Principal Medical Officer's responsibility.

754. Principal Medical Officers will be responsible for the correctness of what is set forth in documents submitted by them. It is their duty to endeavour to adjust all matters that come within the scope of their authority; and in transmitting correspondence to the Director General of the Army Medical Department they will follow the instructions contained in paragraph 39 of these Regulations.

Letters to Director General, how to be addressed and transmitted.

755. Letters and applications from Medical Officers intended for the Director General will be transmitted to him through their immediate superiors.

756. All letters and documents intended for the Director General will be addressed on the envelope to The Under Secretary of State for War, War Office, Pall Mall, London, S.W., with the words "Army Medical Department" on the left hand corner.

Numbers and dates to be quoted.

757. In all replies to communications received, the number as well as the date and purport of the letter answered, will be quoted.

CORRESPONDENCE—continued.

758. Access to official records will only be permitted to those who are intrusted with the duties of the hospital or office to which they belong; and these records will not be made public or communicated to individuals unconnected with the office or hospital without the knowledge or sanction of the Medical Officer in charge.

Access to official records.

759. All applications for the employment of Regimental Orderlies, all sanitary suggestions or recommendations involving outlay, and all communications involving questions of finance, will invariably be addressed to the local military authorities. Copies of such correspondence will be forwarded for the information of the Director General.

Regimental orderlies, sanitary suggestions, &c., and expense connected therewith.

760. Medical Officers will see that a list of all letters, telegrams, &c., which may have been necessarily dispatched by them on the public service is carefully kept in their office or in the hospital, and will from time to time verify its correctness. The amount disbursed under this head will be recovered at the end of each quarter from the District Paymaster, on a certificate W.O. Form 904, signed by the person who made the payment and vouched for as correct by the Medical Officer.

Lists of letttrs to be kept.

SECTION II. — SICK LEAVE, LEAVE OF ABSENCE, AND REPORTS OF ARRIVAL FROM OR DEPARTURE FOR, FOREIGN SERVICE.

Medical Officers on sick leave or half-pay to report.

761. Medical Officers on sick leave, or who have been placed on temporary half-pay on the recommendation of a Medical Board, will report their state of health, in writing, to the Director General, Army Medical Department, fourteen days before the expiration of their leave, or the period for which they may have been granted half-pay.

Applications for leave.

762. In all applications for leave of absence, Medical Officers will be guided by the instructions laid down in section 13, of the Queen's Regulations and Orders for the Army, 1873.

Reports of arrival from or departure for foreign stations.

763. Medical Officers proceeding to, or returning from Foreign Stations, will report their departure or arrival, as the case may be, in accordance with instructions in section 17, paragraph 59, and section 13, paragraph 24, of the Queen's Regulations and Orders for the Army, 1873.

SECTION III.—MEDICAL CERTIFICATES AND MEDICAL BOARDS.

764. In granting Medical certificates to Officers desirous to retire from the Service, to exchange to another corps, or to obtain sick leave, Medical Officers will be guided by the instructions contained in sections 3 and 4 of the Queen's Regulations and Orders for the Army, 1873. Medical certificates.

765. Medical Boards will as a rule consist of three Medical Officers, but in cases of emergency, two will be considered sufficient. The Senior Medical Officer present will be the President. Medical Boards.

766. The proceedings of Medical Boards on sick or wounded Officers, who are recommended to leave the Command, will be made in triplicate and forwarded to the Principal Medical Officer, who will transmit one copy to the Officer ordering the Board, a second, he will give to the sick Officer, with instructions to present it to the Medical Board in London, and the third (with a detailed statement of the Officer's case from the Medical Officer under whose care he has been treated), he will forward to the Army Medical Department, addressed under cover, to the Under-Secretary of State for War. Proceedings of Medical Boards.

767. Proceedings of Medical Boards on Officers who may be recommended for leave with the Command where they are serving, are not required to be forwarded to this country. One copy only will be furnished, which will be forwarded through the Principal Medical Officer to the Officer ordering the Board.

768. The Principal Medical Officer will keep a Register of all Medical Boards held within the Command, on sick Officers or invalid soldiers, in which he will enter the Rank, Name, and Corps of the Officer or soldier, and the Regimental Number of the latter, the date on which the Board assembled, the nature of the disability and the opinion of the Board, together with any other remarks he may think fit. Register of Medical Boards.

769. Medical Boards in forming their opinion on the claims of Officers for compensation for wounds received in action, will be guided by the rules laid down in Part II, Sec. VI, of the Royal Warrant of the 1st May 1878. (Revised Army Regulations, Vol. I.) Opinion of Medical Boards for compensation for wounds.

770. Medical Officers in giving certificates to sick Officers, and Medical Boards in their proceedings will, invariably state whether in their opinion the disability was caused "in and by the service."

SECTION IV.—STATIONERY, PRINTED FORMS, AND BOOKS.

Stationery and W.O. Forms.

771. Principal Medical Officers will obtain supplies of stationery and forms by requisition made out on W.O. Forms 165 and 832. These requisitions will be made annually in accordance with the instructions published from time to time in the Army Circulars.

SECTION V.—DISPOSAL OF USELESS BOOKS.

Disposal of useless records.

772. When books, documents, records, and printed forms have unduly accumulated, and it is considered that their further retention is undesirable, either in the interests of the public or in a professional point of view, steps should be taken for their disposal in accordance with the instruction laid down from time to time in the Army Circulars.

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APPENDIX No. 1.

THE TRAINING OF ARMY MIDWIVES.

General Regulations.

1. If possible such women only as are without family should be selected for instruction as Army Midwives, and a preference should be given to such as possess a fair elementary education.

2. Practical instruction at the patient's bedside, under the personal superintendence of the Medical Officer, should be conveyed as frequently as practicable to the women attending the class, to illustrate the principles and directions laid down in the lectures.

3. A certificate of proficiency should be given to each woman who has regularly attended a full course of lectures, and has shown by her replies at a final examination that she is quite conversant with the subjects taught. But no woman must be admitted to such final examination until she has attended at least 20 cases of labour to the satisfaction of the Medical Officer.

4. At convenient hours, and not oftener than three times a week, the Medical Officer will hold a class for the instruction of the women in the form of lecture and oral examination, illustrated—when practicable—by models and diagrams.

5. The length of such theoretical course of instruction should as a general rule be limited to three months, including 36 lectures. Should a woman after this fail to qualify as laid down in paragraph 3, she should be, at the option of the Medical Officer, remitted to a further course of study, or otherwise.

6. An outline of the course of instruction which midwives should undergo is appended.

At some stations it will probably not be found possible to give full instruction in all the details of this outline, but an attempt should be made to approach to it as nearly as possible.

Outline of Instruction by Lectures.

1. A simple and general idea of the human skeleton.

2. A more particular description of the female pelvis, its bones, measurements, axes, natural and deformed states.

3. A simple account of the female sexual organs, and the anatomy and physiology of the vagina, uterus, ovaries, urethra, rectum, &c., with their relation to each other.

4. A simple account of the development of the fœtus, its growth, nutrition, membranes, &c., with remarks on the placenta and umbilical cord.

5. Some account of the impregnated uterus; the signs of pregnancy; the duration of utero-gestation: death of the fœtus in utero, &c.

6. Abortion and premature labour, the signs of their coming on, means of prevention.

7. Full instructions on the mechanism of labour.

The Training of Army Midwives.

THE TRAINING OF ARMY MIDWIVES—continued.

8. Instructions as to presentations in labour.
To distinguish natural from mal-presentations.

9. Natural labour, its three stages, and their average duration; application of knowledge acquired under former heads; condition of parts at each stage; on undue interference; the delivery; parts that may be injured in delivery; attention to bladder and rectum; management of the cord and placenta; attention to compresses, bandages, bedding, comfort of patient generally.

10. Preternatural labours, distinguishing marks of each variety. Deficient and excessive uterine action; rigidity of the parts, tumours, accumulations in the various viscera; deformities; affections of the fœtal membranes, of the fœtus itself; plural births, &c.

11. Complex labours; cord presentations; retained placenta; hæmorrhage; convulsions; rupture of different parts, &c.

12. Conditions after birth; syncope; flooding; abnormal uterine contraction; inversion of uterus; the lochia; puerperal conditions, fever, mania, &c.; infection; cleanliness; recumbent posture and its term; proper food; as to stimulants, &c.

13. The child: attention to it; asphyxia; deformities; occlusions; treatment of the cord; first food; popular fallacies; the mother's breast, nipples, milk, &c.

General Principles of Sick Nursing.

It being of great importance that the women under training should have a clear and correct conception of the general principles of sick nursing, a few lectures should be devoted to this purpose. The instructions here appended should be amplified and illustrated by the Medical Officer as occasions offer.

1. *The Sick Room.*—It should be kept scrupulously clean, but excessive sweeping, rubbing, and other movements creating noise and raising dust should be avoided. The least possible amount of furniture and hangings should be retained in the room, as tending to diminish cubic space, impair ventilation, and attract dust, infectious emanations, &c. Means should be taken to secure a free ventilation, and as much sunlight as possible, without actually exposing the patient to draughts or to glaring light directly on the face. Care should be taken to regulate the amount of fire in the room, so that the temperature should remain at about 60°. It is useful to have a thermometer in the room, hung away from the fire and near the patient, to show this. It should also be remembered that gas-burning and other artificial lighting tend to vitiate the air, and heat the room, and they are to be employed only sparingly. In most conditions of weather, in most rooms, it will be possible and proper to open the windows freely from the top for a reasonable time, or times, every day. Patients are not more likely to catch cold when properly covered up in bed, than when moving about dressed. A general cheerfulness of arrangement, or even ornamentation when practicable, should not be neglected in a sick room, and the general feeling in the room should be one of order, quietness, and repose. The fumigation and disinfection of a sick room should only be carried out under the direction of the Medical Officer, but the immediate removal of all discharges from the sick, and the thorough purification of the vessels before replacing them should never be neglected. The

The Training of Army Midwives.

same rules apply to all dishes which have been used for food and drinks. If possible cooking should not be carried on in a sick room, although drinks or other articles may be warmed or kept warm, when it is otherwise necessary to have a fire. Access to a sufficient supply of hot and cold water is very desirable.

2. *The care of the Patient.*—There are very few cases indeed in which it is not possible and indeed imperative to sponge daily with tepid water, at least, the hands and face of the sick person. At longer intervals there is seldom objection, and nearly always much advantage from this refreshing process being extended to the other parts of the body, care being taken not to wet the bedding. In feverish cases or where the patient craves it, the lips may be safely moistened at short intervals with cold water, or very dilute vinegar and water, and a cloth or towel wrung out of the same may be passed over the face or laid on the forehead with refreshing effect. The bed and bedding should be scrupulously clean, and changed as often as necessary, spread evenly, and so as to be neither too hard nor too soft, and to be without crease. The head and shoulders are better somewhat raised by an elastic feather pillow, especially during the day.

Examination should be frequently made as to the warmth of the extremities, the soiling of the bedclothes, the appearances of the skin as to eruption, abrasion, or threatened bedsore. The feelings and cravings of the patient are generally well worthy of attention, and probably of gratification. The movement of a hand or an eye should suffice often as a sign to a watchful attendant to spare the fatigue of speech. The temperature of the patient is often of moment to register, and the small thermometer made for the purpose placed in the armpit or under the tongue becomes soon easy to use, and gives valuable information to the Medical Officer at his next visit. The preparation and administration of different kinds of food and drinks can only be learned practically; but points to be remembered are, simplicity of preparation, attention to the Medical Officer's directions, and to the patient's cravings, care that they are neither too hot nor too cold, not too frequently forced down, not too long delayed, and not neglected at night, and especially towards early morning. The administration of medicines by measurement and otherwise, the application of blisters, plasters, ointments, washes, and the like, the preparation and uses of poultices, injections, fomentations, baths, &c., must all be carefully studied, and the Medical Officer's directions as to them on all points faithfully observed. On no account must the nurse take upon herself to administer stimulants to parturient women or others without instructions, nor interpose with fanciful remedies in any case.

The sick nurse should be *simply* dressed, so that she may move about without noise or disturbance of furniture. She should be cheerful without being talkative, gentle and hopeful in demeanour and never harsh or abrupt even in gesture. She must not introduce frequent visitors or gossips to the sick room, nor should she frequently leave it for any unnecessary purpose. She should have her pencil and bit of paper to jot down directions from the Medical Officer, and minute information as to symptoms, progress, &c., for him. She should study to know when it is absolutely necessary to call in the Medical Officer, and arrange beforehand as to some means of conveniently getting access to him.

Stores in a Field Hospital Store Wagon.

APPENDIX No. 2.

LIST OF STORES IN A FIELD HOSPITAL STORE WAGON.

(*General Service Wagon with Fittings.*)

Articles.	No., &c.	Where placed.
Axes, felling, 4½-lbs., straight handles, helved	2	Outside wagon
Axes, pick, helved, 6½ lbs...	2	„ „
Bag, canvas, for flags	1	Compartment B
Basins, iron, enamelled, F.S., 7½ in. ..	5	„ D, 1, No. 6.
„ „ „ 6 in. ..	40	„ C Box 2, Nos. 7 & 9
„ zinc, 11-in., MP	5	„ D 1, No. 6
Blankets, grey, G.S.	50	„ A
Box, money, for money, medals, &c., field, HP, equipment	1*	„ C, Box 3, No. 1
Brushes, hand, scrubbing	2	„ D Box 1 „ 6
„ shaving, HP	2	„ C 1 „ 3
„ washing, laundry	6	„ D 1 „ 6
„ whitewash, 6 oz...	2	„ D 1 „ 7
Buckets, iron, galvanized, 4 galls... ..	2	„ D 1 „ 6
Cans, tin, oil, feeding, 1 pint	1	„ D 2
„ „ soup or water, 3 gallons ..	2	„ C Box 2, No. 6
„ „ oil, with screw top	1	„ D
Cases, bolster, barrack	50	„ B
„ palliasse, ditto	50	„ B
Castor, pepper, pewter	1	„ C 2, Tray 4
Chisels, ripping	1	„ D „ 4
Choppers, meat, butchers'..	1	„ D 4
Cocks, bib, driving, for beer, ¾-inch ..	2	„ C, Box 2, Tray 4
Combs, horn, hair, 8-inch	5	„ B „ 1 do 3
„ ivory, small tooth, 3½-inch ..	2	„ B „ 1 3
Corkscrews, iron, folding, HP	2	„ C „ 4, No. 3
Cups, egg, pewter, HP	10	„ C „ 2, Tray 4
„ tin, drinking, 1 pint, HP, canteen..	34	„ C „ 2 do 2 & 3
„ zinc, spitting, HP, F.S.	6	„ D „ 1, No. 2.
Feeders, earthen, HP	3	„ C Box 2, No. 6
Filters, Crease's, iron, galvanized, complete	1	„ C „ 2 „ 1
Flags, field, HP, white, with red cross, 4 feet square	1	„ B } In bag
„ triangular, directing	2	„ B } In bag
Forks, carving, buck handles	1	„ C, Box 2, Tray 3
„ dinner, black handled, large ..	50	„ C „ 2 „ 2
„ flesh, small..	1	„ D „ 4
Funnels, tin, half-pint	3	2-in. „ C Box 4 do 3 1-in. „ D 2
Gowns, blue serge	5	„ B Box 1 „ 1
Hammers, handled, claw, 20-oz., small ..	1	„ D „ 4
Hooks, bill, handled	1	Outside wagon

* Two only for each Field Hospital.

Stores in a Field Hospital Store Wagon.

STORES IN A FIELD HOSPITAL STORE WAGON—continued.

Articles.	No., &c.	Where placed.
Kettles, tin, cooking, nests of 8	2	Compartment C, Box 2, Nos. 4 & 5
Knives, butchers', cutting, 10-inch ..	3	„ D „ 4
„ carving, buck handled	1	„ C Box 2, Tray 3
„ dinner, black handled, large ..	50	„ C „ 2 „ 1
„ opening meat tins	2	„ C „ 2 „ 3
Ladles, iron, tinned, soup..	1	„ D Box 4
Lamps, hand, small, F.H.	2	„ D „ 3
Lanterns, coloured, red, marquee, H.P. ..	1	„ D „ 3
Lines, clothes, HP., 80 yards	2	Compartment B Box, 1, No. 3
Machine, weighing, 14 lbs., with enamelled pan* and weights, field, HP, equipment	1	„ D 5 „ 1
Measures, pewter, wine and spirit, nested, ½ gill to 1 quart	1	„ C „ 4 „ 3
Mill, coffee, small, FH	1	„ D „ 5
Needles, collar or packing, sizes (1 to 6)..	6	„ B Box 1, No. 3
„ sewing, assorted, women's ..	50	„ B „ 1 „ 3
Pans, iron, frying, round, 12-in., with shifting handles	2	„ C „ 2, Nos. 4 & 5
Pans, bed, zinc, HP	4	„ D 1, No. 1
Plates, tin, dinner	50	„ C Box 2 „ 8
Poles, wood, for: lanterns and square flags, 16 feet	1	Outside wagon.
Poles, wood, for: triangular flags, 7 feet ..	2	„ „
Pots, zinc, chamber, HP and MP.. ..	6	Compartment D, 2, No. 1
Rags, linen.. .. .. .. lbs.	15	„ B.
Razors	2	„ B, Box 1, No. 3
Razor strop	1	„ B „ 1 „ 3
Salt cellars, wooden	3	„ C „ 2, Tray 4
Saw, cross-cut, 5 ft., complete, with case .	1	Outside wagon.
„ hand, 26-inch, with case	1	„ „
„ tenon, iron backed, 14-inch.. ..	1	Compartment D, 4
Scales, weighing, with weights, pillar, for groceries, 7 lbs.	1	„ D 5 „ 1
Scissors, hair cutting, 7-inch	2	Compartment B Box 1, No. 3
Scoops, half-pint	2	„ C „ 4, Nos. 2 & 3
Shapes, or dishes, pudding, 1 pint ..	6	„ C „ 2, No. 6
Sheets, barrack, linen	120	60-in., Compartment A; „ „ B
„ ground, waterproof	25	12-in. „ A; 13 „ „ B
Shirts: cotton	12	Compartment B, Box 1, No. 2
Shirts: flannel	12	„ B „ 1, „ 4
Skewers, with chains, sets of 3	3	„ D 4
Slippers, brown leather .. .. pairs	12	„ B Box 1, No. 2
Socks, woollen .. .. .. „	25	„ B „ 1 „ 3
Spades, helved, common	2	Outside wagon
Sponges, bath, 2 oz.	2	Compartment D, 1, No. 6
Spoons, German silver, table	50	„ C Box 2 Tray 5
Steels, butchers'	1	„ D 4
Stools, camp, folding	2	„ A
„ close, iron, HP canteen, complete .	3	„ D, 1, Nos. 1, 4, 8
Stretchers, ambulance wagon, new pattern with slings, complete	2	„ A, B, C over all
Tables, camp, folding	1	„ A

* The pan packs in box 2—6

Stores in a Field Hospital Store Wagon.

STORES IN A FIELD HOSPITAL STORE WAGON—continued.

Articles.	No., &c.	Where placed.
Thread, packing, middling, 1 lb. balls ..	6	Compartment B, Box 1, Nos. 2 & 3
„ whited brown .. .. lb.	1	„ B „ 1, No. 3
„ worsted, grey .. .. „	1	„ B „ 1 „ 3
Towels, hand, HP	55	„ B „ 1 „ 2
Trowsers, serge, blue lined .. pairs	10	„ B „ 1 „ 1
Urinals, pewter	4	„ D 1 „ 5
Waistcoats, blue serge	10	„ B Box 1 „ 4
Warmers, pewter, stomach	2	„ D „ 1 „ 6

Medical Comforts and Supplies.

Arrowroot .. .. lbs.	50	Compartment C, Box 5, No. 1
Brandy .. .. .. bottles	30	„ C „ 4 „ 1
Essence of beef, Liebig's, .. lbs.	72	„ C „ 5 „ 3
Mustard, in 4 oz. jars .. .. „	5	„ C „ 5 „ 4
Oil, colza,* .. .. galls.	3	„ D „ 3
Pepper .. .. lbs.	5	„ C „ 5 „ 5
Rice .. .. „	50	„ C „ 5 „ 2
Salt .. .. „	16	„ C „ 5 „ 6
Soap .. .. „	30	„ D „ 2
Sugar .. .. „	56	„ C „ 4, No. 2
Tea, compressed .. .. .. „	20	„ C „ 4 „ 4
Wax matches .. .. .. No.	1,000	„ D „ 2
Wick for lamps, ⅛ in. flat* .. yds.	2	„ D „ 2
„ „ „ round* .. „	2	„ D „ 2

List of Tins in Field Hospital Store Wagon.

Can, tin, oil, with screw top		1
Canisters, tin	Pepper or Mustard ..	2
	Tea	1
Cases, tin ..	Arrowroot or rice ..	2
	Sugar	1
	Lined with wood, for salt	1
Tins	Lamp, cotton	1
	Soap	1

---

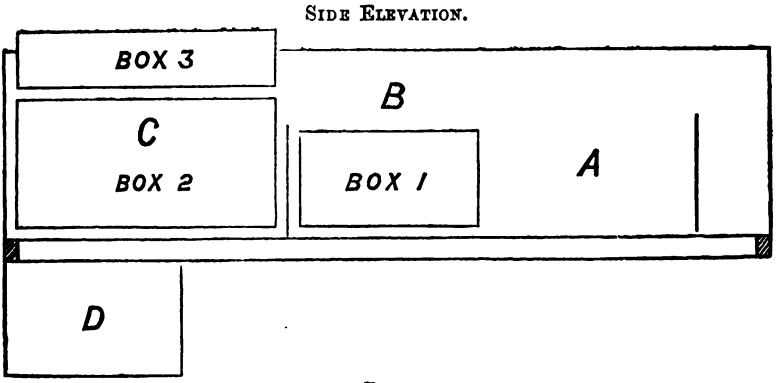
* Oil and wick are drawn from the Commissariat.
The requirements for 25 hospitals are:—

Oil, colza, galls. ..	300
Wick, flat, ⅛" yards ..	200
„ round, ozs. ..	200

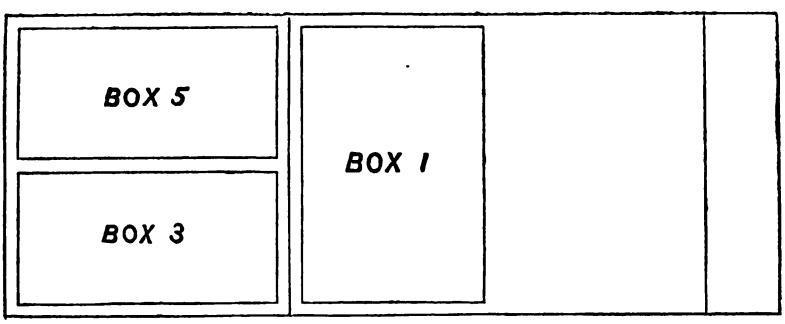
Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON.

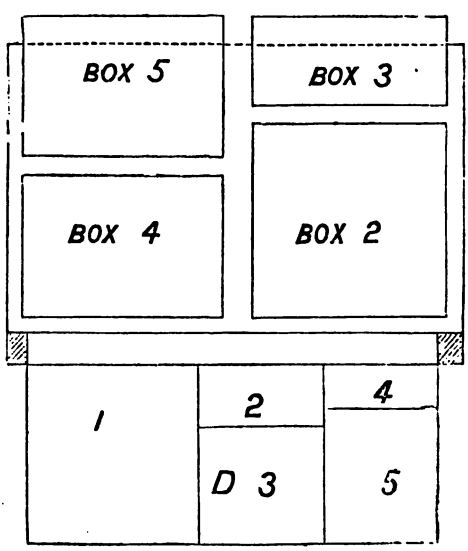
SIDE ELEVATION.



PLAN.



END ELEVATION.



Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON—continued.

The general plan of, and arrangement of the boxes in the wagon are shown in the acccompanying plans, and side and end elevations. The body of the wagon is subdivided into three compartments, A, B, and C, and another is fixed below the tail, marked D. Compartment B is partly occupied by Box No. 1, Compartment C by boxes 2 to 5, and Compartment D is subdivided into five parts, which are numbered 1 to 5, as in the "end elevation." The subdivisions of boxes and the distribution of stores in them, as well as in the other compartments, are given below.

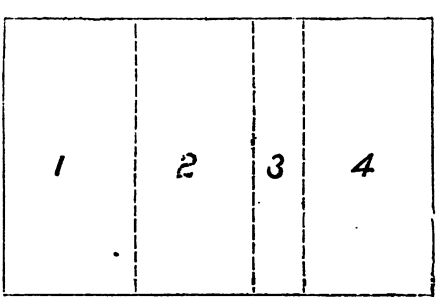
COMPARTMENT A.

	No.
Blankets, grey, G.S.	50
Sheets, barrack, linen	60
„ ground, waterproof	12
Stools, camp, folding	2
Table, camp, folding	1

The blankets are to be folded first lengthwise, then crosswise, and placed in the compartment evenly, one over the other, their greater length being across the wagon. The sheets folded in the same manner are to be placed over the blankets, then the waterproof sheets, and lastly, the table and stools.

COMPARTMENT B.

Box No, 1.



FRONT.

This box has no partition inside, the dotted lines merely define the spaces occupied by the different articles, and have been introduced to facilitate packing. These are to be placed as follows:—

Gowns, blue serge		5	in No. 1
Trowsers, blue serge, lined ..	pairs	10	„
Shirts, cotton		12	in No. 2
Towe's, hand, HP		55	„
Slippers brown leather	pairs	12	„
Thread, packing, pound balls		6	„
Socks, woollen	pairs	25	in No. 3
Clothes line, 80 yards	pieces	2	„
Razors		2	„
Razor strop		1	„

Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON—continued.

Combs, hair, 8-inch		5	in No. 3
„ ivory, small tooth, 3½-in... ..		2	„
Scissors, hair cutting, 7-in... ..	pairs	2	„
Thread sewing, whited brown ..	lb.	1	„
„ worsted	lb.	1	„
Needles, collar or packing..		6	„
„ sewing, assorted, women's ..		48	„
Waistcoats, blue serge		10	in No. 4
Shirts, flannel		12	„

Above Box.

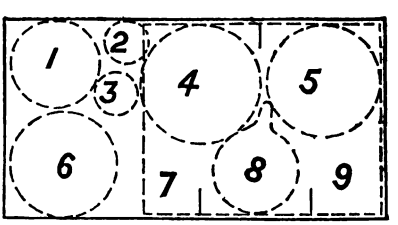
Sheets, barrack, linen		60	
Cases, bolster, barrack		50	
„ paillasse		50	
Sheets, ground, waterproof..		13	
Flags, field, HP, with red cross, square, 4 feet		1	In bag.
Flags, field, triangular, directing.. ..		2	In bag.
Rags, bundle	lb.	15	

The sheets folded as described under A are to be placed over Box No. 1. As the ends are found to rise leaving the centre of the pile lower, this hollow has to be filled up from time to time as the packing goes on. This may be done by first putting in 10 sheets, and then 10 paillasse cases folded lengthwise twice, and 10 bolster cases into the hollow; then another 10 sheets, &c., until the proper number be completed. The waterproof sheets folded as large as possible are to be placed over the others, and the bag of flags and bundle of rags over all.

COMPARTMENT C.

This contains the Boxes 2 to 5, of which the arrangement and contents are as follows. The number in the boxes indicates the position of the different articles named in the subjoined lists. And where more than one description is included under the same number, it is either placed over or inside the first-named opposite that number:—

Box No. 2.



Filters, Crease's*	1	in No.	1
Box with tube, nozzles, and handle ..	1	„	1
Cups, tin, drinking, 1 pint, HP, canteen..	17	„	2
„ „ „ .	17	„	3
Kettles, tin, cooking, nests of 8	1	in No.	4

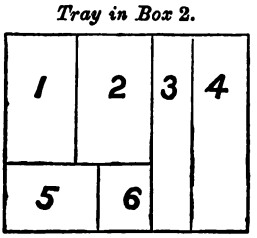
* A description of this filter, with the modes of using it is subjoined. *See* p. 32.

Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON—continued.

Pan, iron, frying, round, 12-in., with shifting handles	1	in No. 4
Kettles, tin, cooking, nests of 8	1	„ 5
Pan, iron, frying	1	„ 5
Cans, tin, soup, 3 gallons	2	„ 6
Shapes, pudding	6	„ 6
Feeders, earthenware	3	„ 6
Enamelled pan of meat weighing machine	1	„ 6
Basins, iron, enamelled	20	„ 7
Plates, tin, dinner (if all these cannot be got in here some may be placed in No. 6)	50	„ 8
Basins, iron, enamelled	20	„ 9
Brushes, shaving	2	„ 3

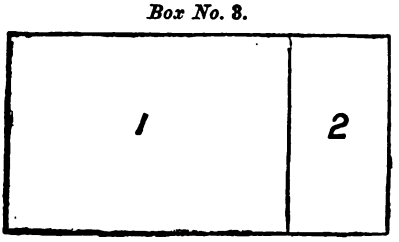
Tray in Box 2.



(*Position shown by dotted lines.*)

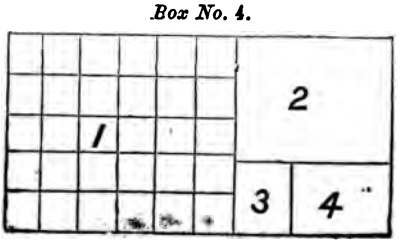
Knives, dinner, black handled, large ..	50	in No. 1
Forks „ „ „ ..	50	„ 2
Knife, carving, black handled	1	„ 3
Fork „ „	1	„ 3
Knives, for opening tins	2	„ 3
Castor, pepper, pewter	1	„ 4
Cocks, bib, driving, ¾-inch	2	„ 4
Cups, pewter, HP, egg	10	„ 4
Salt cellars, wood	3	„ 4
Spoons, German silver, table	50	„ 5

Box No. 3.



Box for money, medals, &c.	No. 1
Space for stationery, books, &c.	„ 2

Box No. 4.

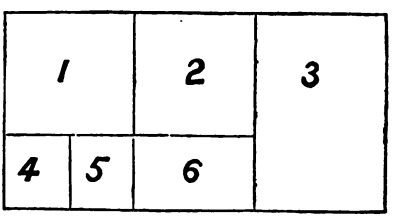


Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON—continued.

Brandy	bottles	30	in No. 1
Tin for sugar	lbs.	50	„ 2
Scoop, half-pint..		1	„ 2
Measures, pewter, half-gill to 1 quart, nested	set	1	„ 3
Funnels, tin, half-pint..		2	„ 3
Scoops, half-pint		1	„ 3
Tin, for tea	lbs.	6	„ 4
Corkscrews		2	„ 3

Box No. 5.

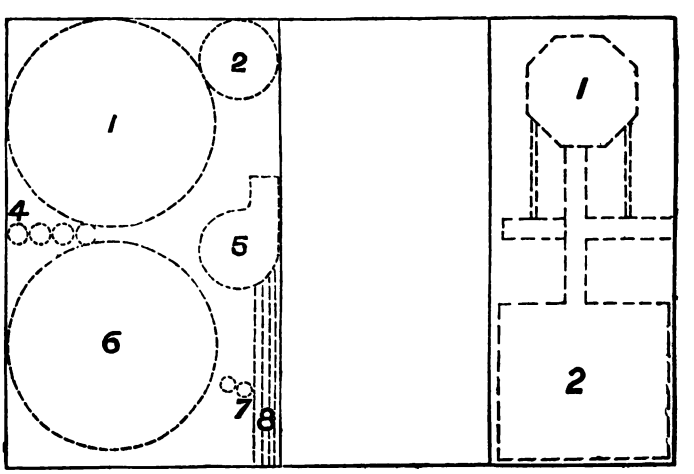


Tin, for arrowroot	lbs.	40	in No. 1
„ for rice	„	50	„ 2
Space for essence of beef ..	„	28	„ 3
Tin, for mustard	„	5	„ 4
„ for pepper	„	5	„ 5
„ lined, for salt	„	20	„ 6

Over A, B, C.

Stretchers (or bearers), N.P., complete .. No. 2

COMPARTMENT D.



The positions of the subdivisions in this compartment are shown in the end elevation given above. In the plans of subdivisions 1 and 5 which follow, the numbers indicate the positions of the different articles in the subjoined lists, and where more than one is included under the same number it is either placed over or inside that first named.

Field Hospital Store Wagon.

FIELD HOSPITAL STORE WAGON—continued.

Subdivision 1 *contains*—

Pans, zinc, HP, canteen bed..	4 in	No. 1
Rings for close stool frames..	3 „	1
Pans for close stools..	3 „	1
Pots, zinc, chamber	6 in	Nos. 1
Cups, zinc, spitting, HP	6 „	2
Legs for close stool frames, placed vertically	9 in	No. 4
Urinals, pewter	4 „	5
Buckets, iron. galvanized, 4 gallons ..	2 „	6
Brushes, hand, scrubbing	2 „	6
„ washing, laundry	6 „	6
Sponges, bath, 2 oz.	2 „	6
Basins, iron, enamelled, 7½-inch	5 „	6
„ zinc, 11-inch, MP	5 „	6
Warmers, pewter, stomach	2 „	6
Brushes, whitewash, 6 oz.	2 „	7
Triangles, for legs of close stools	3 „	8

Subdivision 2.

Tin for soap	lbs.	30
„ to receive can, tin, oil, feeding ..	..	1
Funnel, tin, for oil, ½ pint	..	1
Matches, wax..	..	1,000
Wick, for lamps, flat..	yards	2
„ „ round	„	2
Can, tin, oil, feeding, 1 pint	..	1

Subdivision 3.

Can, tin, with screw stopper, for colza oil	galls.	3
Lanterns, hand, half round	..	2
„ tent, distinguishing, red.. ..	..	1

Subdivision 4.

Chisel, ripping	1
Chopper, meat, butchers'	1
Fork, flesh, small	1
Hammer, handled, claw, 20-oz., small	1
Knives, butchers', cutting, 10-in.	3
Ladle, iron, tinned, soup	1
Saws, tenon, iron back, 14-in.	1
Skewers, with chains	3
Steel, butchers'	1

Subdivision 5.

Machine, weighing (the enamelled pan of this machine in No. 6, Box 2, Compartment C*) ..	1 in No 1
Scales, weighing, with pillar*	„
Box containing sets of weights, ¼ oz. to 7 lbs. and ¼ lb. to 14 lbs.	
Mill, coffee† (with handle taken off over box of weights).	

* Should the large copper pan of these be too wide to go into this subdivision, its sides must be pressed together sufficiently to admit of its being inserted.

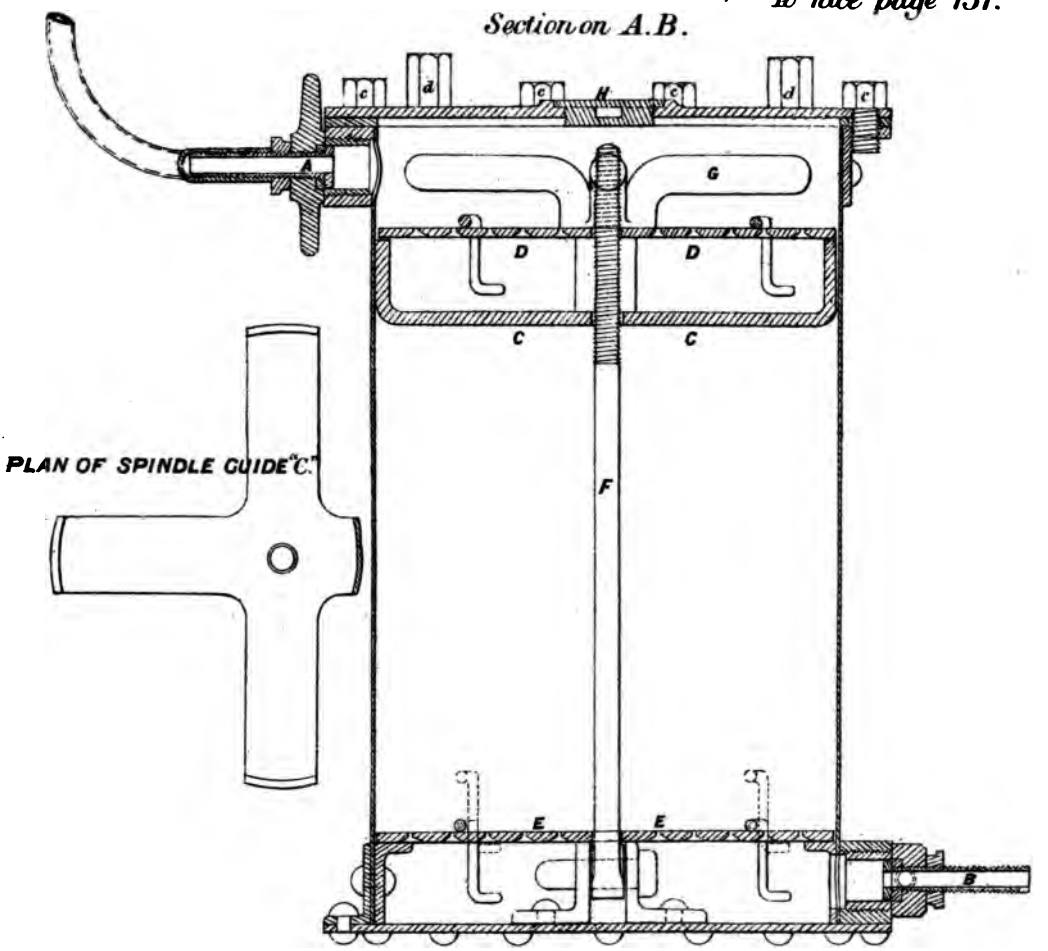
† As in the course of service in the field, it may not always be possible to obtain an upright post sufficiently strong to fix the coffee mill, to the sides of it have been lengthened sufficiently to admit of its being fastened to the rim of the hind-wheel of the wagon when required for use.

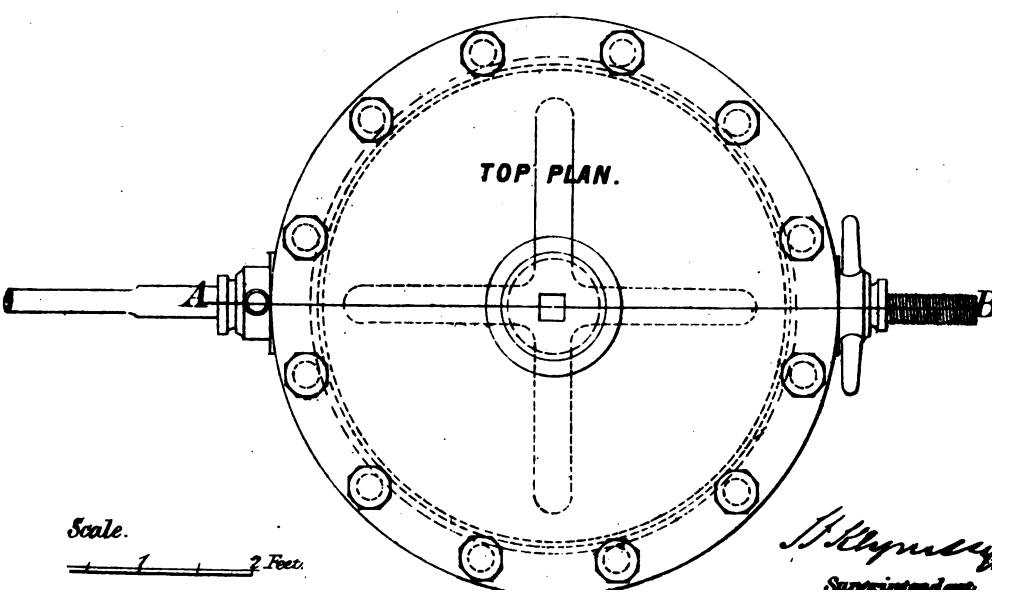
FILTER FIELD HOSPITAL EQUIPMENT.

MAJOR CREASE'S (R.M.A.) PATENT.

FILTER $\frac{3}{8}$TH FULL SIZE, *To face page 151.*

Section on A.B.





FIELD HOSPITAL STORE WAGON—continued.

Outside Wagon.

Axes, felling, 4½-lb., straight handled, helved ..	2
„ pick, helevd, 6½-lb.	2
Hook bill, handled	1
Poles, for distinguishing lamps, flags, &c., 18 feet..	1
„ „ „ 8 „ ..	2
Saws, cross-cut, 5 feet, complete	1
„ hand, 26-in., complete..	1
Spades, helved, common	2

DESCRIPTION OF MAJOR CREASE'S FIELD HOSPITAL FILTER.

This filter has been designed specially to meet the requirements of movable field hospitals—viz., to be compact, little liable to injury, capable of filtering a considerable supply of water, and of being readily used under the varying circumstances in which field hospitals may be placed, while the filter itself can be taken to pieces by any ordinary workman, cleansed, or re-filled with charcoal, and be again ready for use.

This filter consists of a cylinder of galvanized iron 6½ inches wide and 11⅛ inches deep, with a bed of animal charcoal from 8 to 8½ inches in depth, through which the water is passed. The accompanying figure shows the details of the interior structure in section (half size) when ready for use; the water then passes through the nozzle A into the space above the plate D, then through that and the charcoal which lies between it and the plate E, and through the holes in the latter into the chamber below, from which it is run off, through the nozzle B, into a separate vessel placed for its reception.

When not in use, the nozzles A and B should be unscrewed, and with the elastic tube kept in the small box provided for them, and corks should be put into the sockets for the nozzles, to exclude dirt. To take the filter to pieces, the screws *c* and feet *d* must be unscrewed with the key, the cover can then be lifted off; the handle G is then to be unscrewed, and the plate D lifted off, the charcoal above the spindle guide C is to be taken out, and then the guide itself, after which the whole of the charcoal as far as the plate E can be removed, then the plate E itself may be taken out, and the space below cleaned.

To refill the filter, the reverse process is followed; the plate E, having the holes in it cleared of any dirt or oxide they may contain, is to be replaced over the spindle F, and the edges made to rest on the flanges at the sides; the guide C is then to be placed over the top of the spindle, and retained there to prevent its being moved to one side while the charcoal is being rammed in; the charcoal is then to be filled in, in small quantities at a time, and rammed down moderately round the spindle with a piece of wood. When the requisite quantity has been put in, the guide will be fixed in the portion shown in the figure, and the space above filled with charcoal, after which the plate D will be put on and secured down by the handle G. The cover is then to be

Description of Major Crease's Field Hospital Filter.

replaced and screwed down, and the feet *d d d* placed in their proper positions, equidistant from each other. When required for use, the nozzles A and B are to be screwed tightly into their respective sockets, and care must be taken that the leather washers on them are present and in good order, as if not, and air can get through between the nozzle and the socket, the filter will not act.

When the filter is intended to act *descensionally*, as in figure 1, the elastic tube must be fixed on nozzle A; the metal plug H in the cover is then to be removed with the square end of the key, and water poured in from above until it commences to run out from nozzle B; the latter is then to be closed by a plug, or merely by placing the finger against it, while water continues to be poured in above until the filter be full, and air have ceased to come up. The elastic tube is now to be lowered sufficiently to allow water from the filter to expel all air and fill it completely, when the sides of the free end are to be compressed firmly between the finger and thumb, while the chamber under the cover is completely filled with water, and the plug screwed in. The free end of the elastic tube is then plunged into the water in a vessel at a higher level, as in figure 1, and on removing the pressure from it, and the obstruction from nozzle B, the filtered water will flow from it in a good stream. As the water is supplied to the filter on the principle of the siphon, care must be taken that the air is completely removed from the apparatus before commencing, and that none can penetrate at any of the joints.

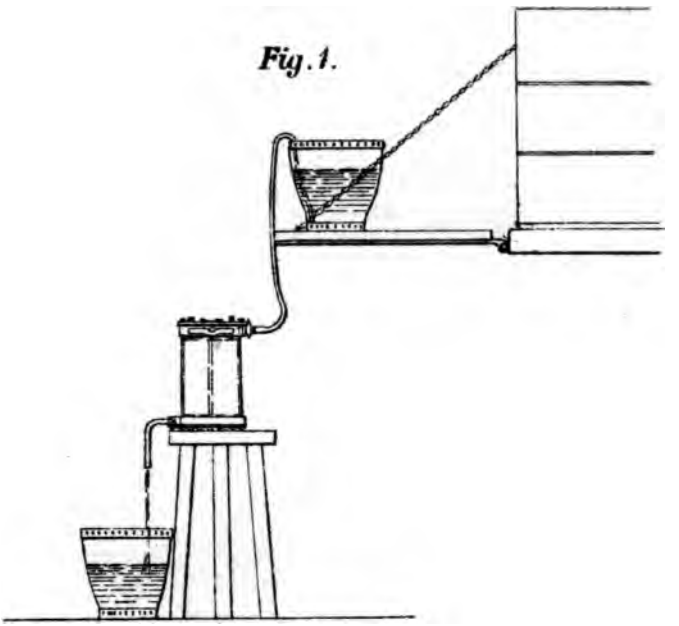
When the filter is required to act *ascensionally*, as in figures 2 and 3, the elastic tube must be attached to nozzle B instead of A. The metal plug is then to be removed from the cover, and the filter filled with water, and all the air expelled from both the filter and elastic tube, as in the previous case, and the free end of the latter compressed between the finger and thumb, while nozzle A is closed by a plug or otherwise. The metal plug is then to be screwed in, and the filter placed in the vessel containing the water to be filtered, but with the bottom upwards, and the elastic tube hanging down; on removing the obstruction from nozzle A, and the pressure from the elastic tube, the stream of filtered water will commence to flow.

The filter may also be used *descensionally*, as in figure 4, by removing the plug from the cover, and pouring water from a jug or other vessel into the upper chamber, a method which might be useful, if from any cause the elastic tubing was lost or unserviceable.

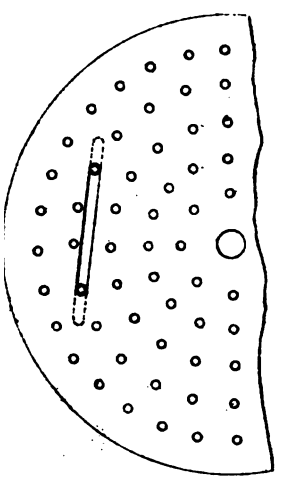
METHODS OF USING THE FILTER.

Scale 3/16 ins to a foot.

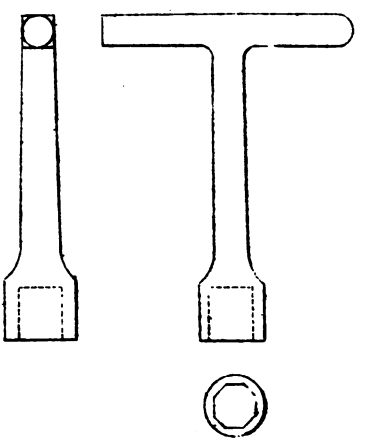
Fig. 1.



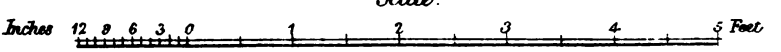
PLAN OF PLATES, D.E.



KEY.



Scale.



Dangerfield Lith. 22, Bedford St. Covent Garden.

To face page 152.

METHODS OF USING THE FILTER.

Scale ⅜ ins to a foot.

Fig. 2.

Fig. 3.

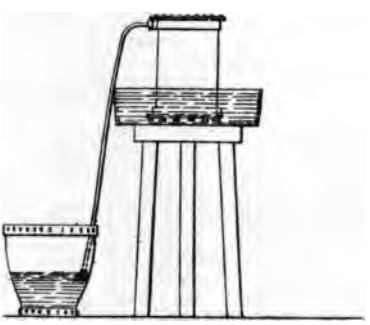


Fig. 4.

Scale.

APPENDIX No. 3.

PHARMACY WAGON.

LIST OF MEDICINES, SURGICAL STORES, AND APPLIANCES AND INSTRUMENTS IN THE PHARMACY WAGON FOR FIELD HOSPITALS.

Articles.	Quantity.		Where placed.				
	lbs.	oz.					
Acaciæ, Contrit:	1	0	Compartment D, Slide		7,	No.	12
Acid, Acetic	2	0	,,	,,	1	,,	12
,, Carbolic..	2	0	,,	,,	6	,,	12
,, Gallic	0	4	,,	,,	2	,,	30
,, Hydrochlor:	0	8	,,	,,	2	,,	17
,, Hydrocyan: dil:	0	2	,,	,,	6	Poisons	1
,, Nitric	0	8	,,	,,	2	No.	18
,, Phosphor: dil:	0	8	,,	,,	2	,,	19
,, Sulphuric	0	6	,,	,,	2	,,	1
,, Tannic	0	4	,,	,,	2	,,	31
,, Tart: Pulv:	1	0	,,	,,	7	,,	1
Alum	2	0	,,	,,	7	,,	13
Ammon: Carb:	1	0	,,	,,	7	,,	14
Antim: Tartarat:	0	8	,,	,,	2	,,	32
Aq: Distillat:	2	0	,,	,,	6	,,	13
Argent: Nitrat:	0	4	,,	,,	2	,,	9
Atropia, Sulph: (Savory & Moore's Discs)	No. 250		,,	,,	6	Poisons	3
Bismuth: Subnit:	0	8	,,	,,	2	No.	33
Bromine	0	8	,,	,,	2	,,	20
Camphor	0	8	,,	,,	7	,,	2
Capsici Pulv:	0	2	,,	,,	2	,,	10
Catechu Contrit:	0	8	,,	,,	7	,,	3
Chiretta contus:	3	0	,,	,,	3	,,	14
Chloral Hydras	1	0	,,	,,	7	,,	4
Chloroform (in 6 bottles)	6	0	,,	,,	6	,,	2-7
Cinchon: contus:	3	0	,,	,,	3	,,	15
Collodion	0	4	,,	,,	2	,,	2
Creasotum	0	4	,,	,,	2	,,	3
Cupri Sulph:	2	0	,,	,,	6	,,	16
Emp: Plumbi:	2	0	,,	,,	3	,,	5
,, Saponis	2	0	,,	,,	3	,,	6
Ergotine (Savory & Moore's discs) ..	No. 250		,,	,,	6	Poisons	4
Ext: Belladon:	0	8	,,	,,	6	No.	10
,, Filicis, Liq:	0	4	,,	,,	2	,,	4
,, Hyoscyam:	0	8	,,	,,	6	,,	10
,, Opii	0	8	,,	,,	6	,,	10
Ferri et Quinæ, Cit:	0	8	,,	,,	2	,,	34
,, Perchlor:	0	8	,,	,,	2	,,	35
,, Sulph:	0	8	,,	,,	2	,,	36
Glycerin:	2	8	,,	,,	6	,,	14

List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c.—continued.

Articles.	Quantity.		Where placed.				
	lbs.	oz.					
Hydrarg: Iodid: Rub:	0	2	Compartment D,	Slide	6	Poisons	2
„ Oxid: Rub:	0	4	„	„	2	No.	11
„ Perchlorid:	0	2	„	„	6	Poisons	5
„ Subchlorid:	0	8	„	„	2	No.	12
Hydrargyrum c Cretâ	0	8	„	„	2	„	37
Iodin:	0	4	„	„	2	„	13
Ipecac: contrit:	1	0	„	„	7	„	15
Lin: Saponis	2	0	„	„	1	„	13
Liquor: Ammoniæ	1	0	„	„	6	„	8
„ Arsenicalis	0	8	„	„	2	„	21
„ Epispastic	0	4	„	„	2	„	5
„ Sodæ, Chlor:	2	0	„	„	1	„	14
„ Strychniæ	0	2	„	„	6	Poisons	6
Magnesia	0	8	„	„	3,	No.	9
„ Sulphas	7	0	„	„	3	„	16
Morph: Acet: (Savory & Moore's discs)	No. 1,000		„	„	6	Poisons	7
„ Hydrochlor:	0	2	„	„	2	No.	14
Ol: Anisi	0	2	„	„	2	„	6
„ Copaibæ	2	0	„	„	1	„	15
„ Lini	12	0	„	„	5	„	10, 11
„ Menth: Pip:	0	2	„	„	2	„	7
„ Olivæ	8	0	„	„	1, 5	„	16, 12
„ Ricini	8	0	„	„	1, 5	„	17, 13
„ Terebinth:	2	0	„	„	1	„	18
Opii Contrit:	0	4	„	„	2	„	38
Pil: Colocynth: et Hyoscyam: ..	1	0	„	„	6	„	11
„ Hydrarg:	1	0	„	„	6	„	11
Plumbi, Acet:	2	0	„	„	7	„	16
Potassa Caustica	0	4	„	„	2	„	15
Potass: Bicarb:	1	0	„	„	7	„	5
„ Chloras	1	0	„	„	7	„	6
„ Nitras	2	0	„	„	7	„	17
„ Permanganas: crud: ..	14	0	„	„	3	„	20
„ „ pur. ..	0	8	„	„	2	„	39
„ Tartras Acida	1	0	„	„	7	„	7
Potassii, Bromid:	0	8	„	„	2	„	40
„ Iodid	1	0	„	„	7	„	8
Pulv: Cretæ Arom c Opio	4	0	„	„	3	„	17
„ Ipecac: comp:	0	8	„	„	7	„	9
„ Jalap: comp:	1	8	„	„	7	„	18
Quinæ Disulph:	0	12	„	„	7	„	19
Rhei: contrit	0	8	„	„	7	No.	10
Salicine	0	12	„	„	6	„	17
Senegæ Rad:	3	0	„	„	3	„	18
Sennæ Fol:	3	0	„	„	3	„	19
Sodæ Bicarb:	2	0	„	„	7	„	20
Spirit: Æther Comp:	1	0	„	„	1	„	1
„ „ Nitrosi	1	0	„	„	1	„	2
„ Ammon: Arom	1	0	„	„	1	„	3
„ Chloroform:	1	0	„	„	1	„	4
„ Rectificat:	2	0	„	„	1	„	19
Strychniæ (Savory & Moore's discs)	No. 250		„	„	6	Poisons	8
Sulphur Sublimat:	2	0	„	„	3	No.	10
Tinct: Acconit:	0	8	„	„	2	„	22
„ Aurant:	0	8	„	„	2	„	23
„ Capsici	0	8	„	„	2	„	24

List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c.—continued.

Articles.	Quantity.		Where placed.			
	lbs.	oz.				
Tinct: Cardam: Co:	1	0	Compartment D, Slide	1	„	5
„ Catechu	2	0	„ „	1	„	20
„ Colch: Sem:	0	8	„ „	2	„	25
„ Digitalis	0	8	„ „	2	„	26
„ Ferri Perchlor:	1	0	„ „	1	„	6
„ Ergotæ	0	4	„ „	2	„	8
„ Hyoscyam:	1	0	„ „	1	„	7
„ Iodi	1	0	„ „	6	„	9
„ Lobeliæ	0	8	„ „	2	„	27
„ Myrrhæ	0	8	„ „	2	„	28
„ Opii	1	0	„ „	1	„	8
„ Rhei Co:	1	0	„ „	1	„	9
„ Scillæ	1	0	„ „	1	„	10
„ Sennæ	1	0	„ „	1	„	11
„ Valerian	0	8	„ „	2	„	29
Ung: Cetacei	28	0	„ „	3	„	21, 22
„ Hydrarg Fort	2	0	„ „	3	„	7
„ Resinæ	2	0	„ „	3	„	8
Zinci Chlor:	0	8	„ „	2	„	41
„ Oxyd:	0	8	„ „	2	„	42
Zingiber. contrit:	0	8	„ „	7	„	11

Dispensing Appliances, &c.

Blank labels .. .. .. No.	200	Compartment D, Slide	4,	Drawer	10
Bolus Tiles, 10-in. .. .. „	2	„ „	4	No.	6
Bottles, 4-oz. .. .. .. „	18	„ „	4	„	9
„ 8-oz. .. .. .. „	12	„ „	4	„	9
Boxes, chip .. .. .. papers	1	„ „	4	„	9
„ paper .. .. .. „	2	„ „	4	„	9
Corks, assorted. .. .. gross	1½	„ „	4	„	9
Corkscrews, folding	2	„ „	5	„	15
Funnel, tin, ½ pint	1	„ „	5	„	15
Gallipots, nests of 4	5	„ „	4, 5	Nos.	2 & 1
Measures, glass, minim	2	„ „	4, 6	No. / Poisons	1 / 10
„ „ 2-oz.	1	„ „	4	No.	1
„ „ 10 „	1	„ „	4	„	1
„ pewter, ounce	1	„ „	4	„	2
„ tin, pint	1	„ „	4	„	1
Mortars and pestles, small	1	„ „	6	Poisons	10
„ „ medium . ..	2	„ „	5	No.	15
Paper wrapping .. .. quire	1	„ „	4	„	7
Pill machine	1	„ „	3	„	4
Scales and weights, grain, small ..	1	„ „	6	Poisons	9
„ „ „ large ..	1	„ „	3	No.	2
„ „ „ stand for .	1	*			
„ „ ounce	1	„ „	3	„	2
„ „ „ stand for .	1	*			
Spatulas, small	1	„ „	6	Poisons	10
„ ordinary	3	„ „	5	No.	15
„ spreading	1	„ C,		centre.	
Stopper, loosener	1	„ D, Slide	3,	No.	1

* Stems for these on top of Slide.

List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c.—continued.

Dressing Materials, &c.

Articles.	Quantity.	Where placed.
Bandages, calico, 1½-in. by 4 yds. No.	200	Compartment A, drawer No. 1
" " 2½ " 7 " "	288	" " " 2
" " 3 " 8 " "	240	" " " 3
" flannel 4 " 8 " "	50	" " " 4
Calico . .. . yds.	50	" E " 1
Carded cotton . .. .. lbs.	6	" " 1
Flannel. .. .. .. yds.	20	" " 1
Iron wire, plated .. .. oz.	2	" D, Slide 3 " 12
Leather, skins of .. .. No.	6	" " 4 " 16
Ligature, cat-gut, carbolized . oz.	2	" " 3 " 13
Ligature, silk .. .. .. "	8	" " 3 " 12
Linen .. .. yds.	30	" E " 1
Lint .. .. lbs.	70	" B
" Marine .. .. .. "	36	"
Oiled silk .. .. .. yds.	6	" D " 4 " 14
Pins .. .. oz.	8	" " 3 " 13
Plaster, adhesive, Leslies', tins:		
12 ½-inch tapes, each 12 yards. No.	6	One case of each in Compartment D, " 5 " 4
6 1-inch tapes, each 10 yards . "	12	
1 6-inch tape " 14 " . "	6	
Plaster, isinglass .. .. yds.	20	Remainder in Compartment E " 1
" soap .. .. .. "	24	
Sponges, surgeons' .. .. No.	36	" D " 4 " 11
Tape, broad .. .. .. pieces	6	" " 5 " 3
Tow, surgeons' .. .. lbs.	40	" B
Waterproof cloth, German .. yds.	30	" E " 1
Wax for ligatures .. .. oz.	2	" D " 3 " 12

Surgical Apparatus and Appliances.

Air cushions .. .. .. No.	6	Compartment D, slide 4. No. 16
Arm cushions, Strohmeyer's.. "	6	" C, centre
Arm slings .. .. .. "	6	" "
Brackets, iron, galvanized, and screws	6	" "
Fracture apparatus, assorted, viz.:—		
Thigh—long splint, 2 scored ditto pads, &c... .. .. sets	6	The long splints, those with foot pieces and accompanying apparatus and Smithson's splints in compartment G; remainder in C, left side
Thigh—long splint, with foot pieces and other articles	2	
Thigh—Smithson's anterior splint	2	
Knee joint, flannel for, plaster of Paris	4	Compartment C, centre.
Leg and ankle scored splints, pads, &c., 17-inch .. .. sets	3	" left side
Leg and ankle scored splints, pads, &c., 19-inch .. sets	3	" "
" iron, with pads, right	3	" "
" " left	3	" "
" flannel, for plaster of Paris	6	" centre
" McNalty's splints ..	3	" left side

List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c.—continued.

Articles.	Quantity.	Where placed.
Surgical Apparatus—continued.		
Arm, scored splints, pads, &c., 9 and 11-inch .. .. .. sets	8	Compartment C, right side
Arm, scored splints, pads, &c., 10 and 12-inch .. .. .. sets	8	,, ,,
Elbow, winged, hinged splints .. No.	3	,, ,,
Fore-arm, scored splints, pads, &c., 13-inch .. .. .. sets	3	,, ,,
Fore-arm, scored splints, pads, &c., 14-inch	3	,, ,,
Fore-arm, scored splints, pads, &c., 15-inch .. .. .. sets	3	,, ,,
Wrist and hand, Palmar splints, No.	8	,, ,,
Gutta-percha, 18 inch by 4 inch, by $\frac{3}{16}$-inch .. .. .. pieces	12	,, centre
India-rubber drainage tubing yds.	18	,, D, slide 4 No. 16
Irrigators and tubing, nest of 3 .. set	1	,, ,, 4 ,, 11
Plaster of Paris .. .. lbs.	30	,, ,, 5 Nos. 5 to 9
Pullies and lines for counter extension .. .. No.	6	,, C, centre
Steel trusses, reversible .. ,,	4	,, D ,, 4 No. 15
Suspensory bandages.. .. ,,	6	,, ,, 4 ,, 15
Water glass	2	,, ,, 6 ,, 15

Sundry Articles.

Bandage roller .. .. No.	1	Compartment D, slide 3. No. 1 Handle and spindle in ,, 4
Basins, zinc, 11-inch	2	Compartment D, slide 4 ,, 5
Camel-hair brushes	4	,, ,, 3 ,, 12
Cover for dispensing table at rear of wagon	1	,, H ,, 3
Hone	1	,, D ,, 4 ,, 12
Ink bottles	2	,, ,, 4 ,, 10
,, eraser and india-rubber	1	,, ,, 4 ,, 10
,, powders	2	,, ,, 4 ,, 10
Lamps, hand, small, FH	2	,, ,, 3 ,, 3
Lamps, hospital, operating ..	1	,, H ,, 2
Matches, wax, box containing ..	1,000	,, D ,, 3 ,, 1
Needles packing 6-in.	4	,, ,, 3 ,, 12
Needles sewing, women's ..	25	,, D ,, 3 ,, 12
Oil, colza .. .. .. pints	5*	,, ,, 5 ,, 14
,, mineral (kerosine or paraffin) ..	8*	,, H ,, 1
Pencils, blacklead	2	,, D ,, 4 ,, 10
Pens, steel	2	,, ,, 4 ,, 10
Penholders	4	,, ,, 4 ,, 10
Pins, tent, small	10	,, H ,, 3
Ruler, 12-inch, ebony	1	,, D ,, 4 ,, 7
Scissors, counter .. .. pairs	2	,, ,, 5 ,, 15
Stethoscopes, vulcanite .. No.	2	,, ,, 4 ,, 16
Syringes, enema, pewter	1	,, C, centre.
,, urethra, glass	6	,, D, slide 4 ,, 13
,, ,, pewter	12	,, ,, 4 ,, 13
Table, operating, FH equipment, ..	1	,, G

* Commissariat supply for 12 field hospitals, 120 pints of colza, and 192 pints of mineral oil.

List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c.—continued.

Articles.	Quantity	Where placed.
Test paper, litmus .. .. books	24	Compartment D, Slide 3 No. 11
„ „ turmeric „	12	„ „ 3 „ 11
Test tubes, nest of 4	6	„ „ 3 „ 11
Thermometer bath	1	„ „ 4 „ 9
Thread { packing, small .. lb.	1	„ D „ 5 „ 2
Thread { sewing, whited brown, oz.	4	„ „ 3 „ 12
Urinometer apparatus	1	„ E „ 1
Wick, for lamps, ⅝-inch, flat.. yds.	2*	„ D „ 5 „ 4
„ ⅞-inch, flat for mineral oil .. .. yds.	1*	„ „ 5 „ 4

* Commissariat supply, for 12 hospitals 48 and 24 yards respectively.

Surgical Instruments.

Amputating case	1	Compartment F, drawer No. 2
„ spare knives .. case	1	„ „ „ 2
Bandage, for bloodless operations..	1	„ „ „ 1
Catheters, case of	1	„ „ „ 1
Cauterising irons	3	„ „ „ 1
Chloroform inhaler	2	„ „ „ 1
Cupping instruments.. .. set	1	„ „ „ 1
Dressing cases, for Orderlies ..	5	„ „ „ 1
Eye instruments .. .. set	1	„ „ „ 1
General case of instruments	1	„ „ „ 2
Gypsum bandage instruments .. case	1	„ „ „ 2
Hypodermic syringes	3	„ „ „ 1
Ophthalmoscope laryngoscope .. case	1	„ „ „ 1
Pocket case of instruments .. No.	1	„ „ „ 1
Post mortem instruments .. case	1	„ „ „ 1
Resection instruments .. „	1	„ „ „ 2
Stomach pump	1	„ „ „ 1
Transfusion apparatus (Roussel's) ..	7	„ E, „ „ 1

There is space in the wagon for the undermentioned Medical Comforts, and the tins, &c., necessary to carry them are placed in it; but, to save weight, it is not intended that these should be filled unless under very urgent circumstances.

Arrowroot .. .. .. lbs.	12	Compartment F, No. 4
Brandy .. .. bottles	18	„ E „ 2
Essence of meat .. .. lbs.	48	„ „ 4
Mustard .. .. .. „	3	„ „ 4
Pepper.. .. .. .. „	3	„ „ 4
Rice .. .. „	20	„ F „ 3
Salt .. .. „	14	„ E „ 4
Sugar .. .. „	20	„ F „ 5
Tea, compressed .. .. „	11	„ F „ 4
Kettle, tin, tea, 2-gallon	1	„ E „ 3
„ tin, cooking, nest of 4 ..	1	„ E „ 3

List of Medicines, Surgical Stores, &c.

LIST OF MEDICINES, SURGICAL STORES, &c.—continued.

List of Tins in Pharmacy Wagon.

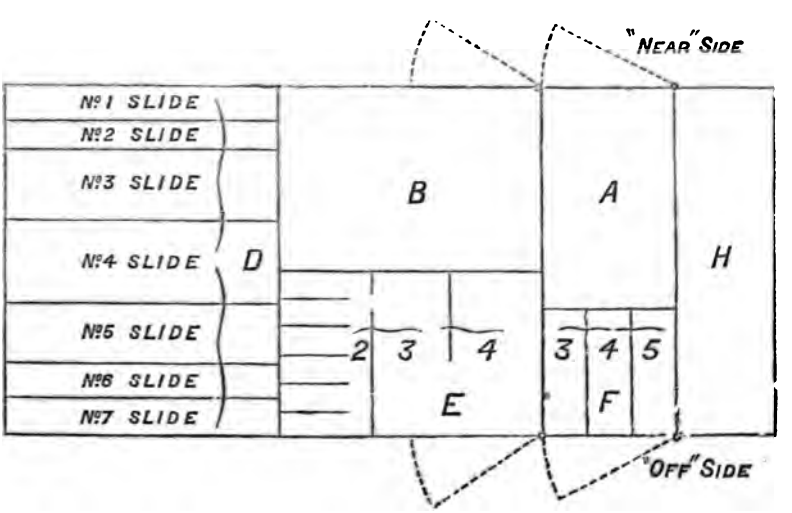
Cans, tin, with screw top, 6 lb. oil				5
„ 10 lb. paraffin				1
Cases, tin	with lids opening at top	Medical comforts	long	2
			medium	2
			small	2
			lined with wood, salt	1
		Medicines	15 lbs.	3
			7 lbs.	6
			2 lbs.	9
			1 lb.	2
			8 ozs.	3
			pills and powders	8
		Matches		1
	with sliding covers, 8 lbs.			5

List of Bottles in Pharmacy Wagon.

	N.	W.
2 lb., stoppered	14	—
2 lb., wood top-cork	—	10
1 lb., „ „	—	9
1 lb., stoppered	13	2
8 oz., „	11	3
8 oz., wood top-cork	—	10
4 oz., „ „	—	7
4 oz., stoppered	5	1
2 oz., „	2	—
2 oz., wood top-cork	—	2
1 oz., „ „	—	4
12 oz., capped	6	—
6 oz., „ engraved labels	2	—
3 oz., „ „ „	3	—

DESCRIPTION OF PHARMACY WAGON.

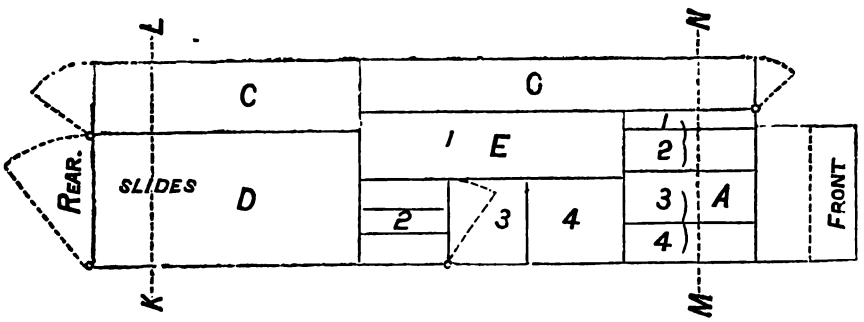
HORIZONTAL SECTION.



Description of Pharmacy Wagon.

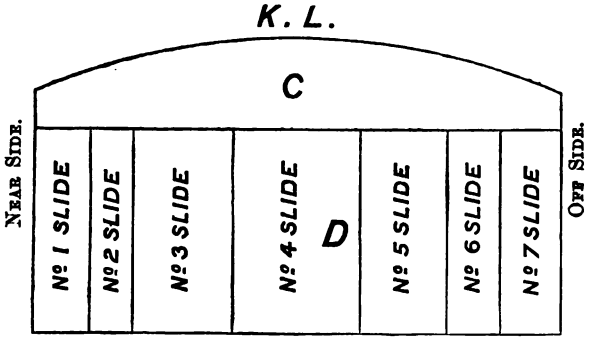
DESCRIPTION OF PHARMACY WAGON—continued.

LONGITUDINAL SECTION.

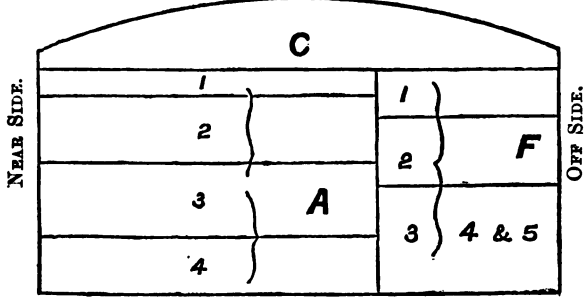


TRANSVERSE SECTION ON LINE.

K. L.



M.N.



The accompanying plans give the interior arrangements of this wagon in sufficient detail to enable anyone, with a few words of explanation, to place the different articles enumerated in the subjoined lists in the places assigned for them; or to permit a person who has seen the wagon for the first time to lay his hand on any of these, after ascertaining from the list where it is to be found.

The different compartments in the wagon are indicated by the letters A to H. By the horizontal section it will be seen that two open on the near side, the foremost of which is marked A, the next one B. That

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

marked D opens to the rear, and by the longitudinal section another marked C is shown over it; the two opening on the off side are marked respectively E and F; and the longitudinal section shows another marked G, over A, B, E, and F, but opening from the front over the driver's seat; finally, the compartment under the driving seat is lettered H.

The various subdivisions in these compartments are numbered, commencing with the uppermost, and proceeding from left to right when there are more than one on the same level. Thus Compartment A contains four drawers for bandages (*see* transverse section MN), which are numbered 1 to 4 from above downwards.

Compartments B and C have no subdivision. Compartments D contains seven slides numbered 1 to 7, of which further details will be given below. Compartment E has four subdivisions, as shown in the longitudinal section; No. 1 being for waterproof cloth and other bulky articles, No. 2 being a small locker for 18 bottles of brandy; No. 3 for cooking utensils; and No. 4 for essence of meat and other medical comforts. Compartment F (*see* transverse section MN) has five subdivisions, of these Nos. 1 and 2 are drawers for surgical instruments, and Nos. 3, 4, and 5 below are for portions of medical comforts. Compartment G receives the operating table, and the long splints for fractures of the thigh, which cannot be placed elsewhere. Compartment H has two numbered subdivisions; No. 1 for a can of mineral oil, and No. 2 for the operating lamp, while the remainder of the space receives the cover for the dispensing place at the rear, and the horse blankets, brushes, &c., required by the driver.

The door of Compartment D is hinged below, and when opened falls back into the horizontal position, and forms a table for the dispenser to work at. The slides Nos. 1 to 7 in this compartment draw out over this table. Nos. 1 to 4 face to the right, and Nos. 5 to 7 to the left. Slides 1, 2, 6, and 7 contain most of the medicines required in dispensing, while the apparatus employed by the compounder is nearly all placed in the ends of 3, 4, and 5, directly facing him, and within reach, while the portion of the table opposite these slides is available for him to work at. In the slides, as elsewhere, every subdivision is numbered, commencing at the left of the upper row as it faces the compounder, and embracing those below in succession. In slides 3 and 4 the enumeration commences with the subdivisions in the ends, but in 5, as it commences from the other end, the outer subdivision is the highest number. An elevation of each slide, with the numbers of each subdivision, will be found under D in the list of the contents of the separate compartments.

Contents of Compartments.

COMPARTMENT A.

4 Drawers—

No. 1.	Bandages, calico,	1½	in. wide,	4	yards long	..	No.	200
No. 2.	Ditto	2½	„	7	„	..	„	283
No. 3.	Ditto	3	„	8	„	..	„	240
No. 4.	Bandages, flannel,	4	„	8	„	..	„	50

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

These bandages to be placed in the drawers on their ends, those in Nos. 2 and 3 in two tiers. As the space occupied will vary somewhat according to the thickness of the material the bandages are made of, should the drawers not contain the above numbers, those for which there is not room in Compartment A can be placed in one of the other compartments.

COMPARTMENT B.

Second Cupboard.

Lint, fine	lbs. 70
Marine lint, 1 lb. tins	No. 36
Surgeons' tow	lbs. 40

The marine lint, in 1 lb. tins, to be placed along the partition between A and B; six tins, standing vertically, are to be placed here with a similar row close to this one, and there being room vertically for two more tins, the full quantity can be disposed of. The tow, in bundles of ½ lb. rolls, is to be placed with the ends of the rolls against the partition between B and D, so as to fill up the space from the side of the wagon to the central position; and the lint, in 1 lb. rolls, is to occupy the space between the marine lint and the tow, the ends of the rolls being against the central partition, with a similar row in front of it. Each article may then be got at from the door of the compartment, without moving any of the others.

COMPARTMENT C.

Under roof, rear of Wagon.

Arm cushions, Strohmeyer's..	No. 6
Arm slings	„ 6
Brackets, iron, galvanized, and screws	„ 6
Fracture apparatus, assorted—viz.:—*	
Thigh, long splint, 2-scored ditto, pads, &c.	Sets 6
„ with foot-piece and other articles mentioned	„ 2
Knee-joint, flannel, for plaster of Paris	No. 4
Leg and ankle, scored splints, pads, &c., 17-inch	Sets 3
„ „ „ „ 19 „	„ 3
„ „ iron, with pads, right	„ 3
„ „ „ left	„ 3
„ „ flannel, for plaster of Paris	No. 6
„ „ McNalty's splint	„ 3
Arm, scored splints, pads, &c., 9 and 11-inch	Sets 8
„ „ „ 10 and 12 „	„ 8
Elbow, winged, hinged splints	No. 3
Forearm, scored splints, pads, &c., 13-inch..	Sets 3
„ „ „ 14 „	„ 3
„ „ „ 15 „	„ 3
Wrist and hand—Palmar splints	No. 8
Gutta-percha, 18-in. by 4-in. by $\frac{3}{16}$	Pieces 12
Pullies and lines for counter-extension	No. 6
Spatula, spreading	„ 1
Syringe, enema, pewter	„ 1

* *See* note on fracture apparatus at page 170.

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

The long splints, those with foot pieces and accompanying apparatus, and Smithson's splints, in Compartment G.

In packing this compartment the apparatus for fractures of the thigh should be placed at the left, with that for the leg alongside of it, each occupying the full length from the end to the door, so that sets of either can be got at as required without disturbing the others. Similarly, apparatus for the arm should be placed on the right of the compartment, extending its full length, with those for the fore-arm alongside. In the centre between them the arm slings to be placed at the end, with the Strohmeyer's cushions close to them, and the other smaller articles towards the door, as may be found convenient.

COMPARTMENT D.

SLIDE No. 1.

1	2	3	4	5	6	7	8	9	10	11
12	13	14	15	16	17	18	19	20		

		No. in Slide.
Top Division.—Eleven 1-lb. stoppered bottles.		
Spirit Ætheris	1 lb.	1
„ „ nit.	1 „	2
„ Ammon: Arom:	1 „	3
„ Chloroform:	1 „	4
Tinct: Cardam: Co:	1 „	5
„ Ferri Perchlor:	1 „	6
„ Hyoscyam:	1 „	7
„ Opii	1 „	8
„ Rhei	1 „	9
„ Scillæ..	1 „	10
„ Sennæ	1 „	11
Bottom Division.—Nine 2-lb. stoppered bottles.		
Acid: Acetic:	2 lb.	12
Lin: Saponis	2 „	13
Liq: Sodæ Chlor:	2 „	14
Ol: Copaibæ	2 „	15
Ol: Olivæ	2 „	16
Ol: Ricini	2 „	17
Ol: Terebinth	2 „	18
Spirit Rectificat	2 „	19
Tinct: Catechu	2 „	20

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

SLIDE No. 2.

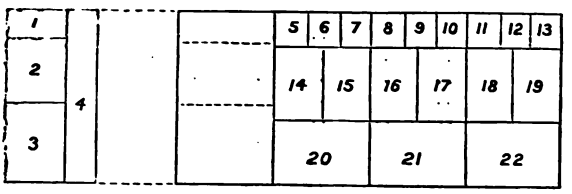
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29			
30	31	32	33	34	35	36	37	38	39	40	41	42			

		No. in Slide.
Top Division.—Eight 4-oz. stoppered bottles.		
Acid Sulph : pur :	6 oz.	1
Collodion	4 „	2
Creasote	4 „	3
Ext : Filicis Liq :	4 „	4
Liq : Epispasticus	4 „	5
Ol : Anisi	2 „	6
„ Menth : Pip	2 „	7
Tinct : Ergotæ	4 „	8
Eight 4-oz. wide-mouth bottles.		
Argent : Nit :	4 oz.	9
Capsici Pulv :	2 „	10
Hyd : Oxid : Rub :	4 „	11
„ Subchlor :	8 „	12
Iodum	4 „	13
Morph : Hydrochlor :	2 „	14
Potass : Caustica	4 „	15
Centre Division.—13 8-oz. stoppered bottles.		
Acid, Hydrochlor : pur :	8 oz.	17
„ Nitric pur :	8 „	18
„ Phosph : dil :	8 „	19
Bromine	8 „	20
Liq. Arsenicalis	8 „	21
Tinct : Aconiti	8 „	22
„ Aurant :	8 „	23
„ Capsici	8 „	24
„ Colch : Sem :	8 „	25
„ Digitalis	8 „	26
„ Lobeliæ	8 „	27
„ Myrrhæ	8 „	28
„ Valerian :	8 „	29
Bottom Division.—13 8-oz. wide-mouth bottles.		
Acid Gallic	4 oz.	30
„ Tannic	4 „	31
Antim : Tart :	8 „	32
Bismuth : Nit :	8 „	33
Ferri et Quiniæ Cit :	8 „	34
Ferri Perchlor :	8 „	35
Ferri Sulph :	8 „	36
Hydrarg : c. Cretâ :	8 „	37
Opii Pulv :	4 „	38
Potass : Permangan :	8 „	39
„ Bromid :	8 „	40
Zinci Chlorid :	8 „	41
„ Oxid	8 „	42

Description of Pharmacy Wagon.

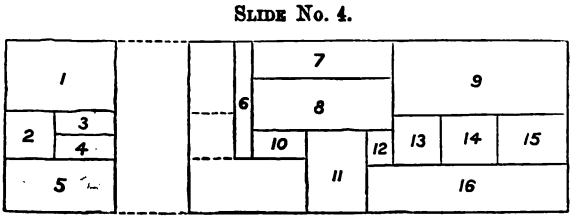
DESCRIPTION OF PHARMACY WAGON—continued.

SLIDE No. 3.



		No. in Slide.
Bandage roller* (handle for ditto in 4)	No. 1	1
Stopper loosener	„ 1	1
Match box	„ 1	1
Scale and weights, grain, set	„ 1	2
Scales and weights, ounce „ (stands for ditto on top of slide)†	„ 1	2
Lamp, hand, small, FS	„ 2	3
Pill machine	„ 1	4
Emp: Plumbi	2 lb.	5
„ Saponis	2 „	6
Ung: Hydrarg:	2 „	7
„ Resinæ	2 „	8
Magnesia	8 „	9
Sulphur	2 „	10
Test tubes and papers (nests of 4, No. 6; papers, No. 36)	..	11
Needles, sewing and packing, thread, silk, plated wire, white wax, camel hair brushes, pins, and carbolized ligature	..	12 13
Chiretta	3 lb.	14
Cort: Cinchon:	3 „	15
Magnes: Sulph:	7 „	16
Pulv: Creta Arom:	4 „	17
Senegæ Rad:	3 „	18
Sennæ, Fol:	3 „	19
Potass: Permangan:	14 „	20
Ung: Cetacei	28 „	21 & 22

SLIDE No. 4.



* When required to roll a bandage, the frame in No. 1 is to have one end of the horizontal piece placed in the opening at the left-hand corner of the iron ledge round the dispensing table, and the peg attached to the upright at the other end is to be passed through the hole in the latter into that in the table, which will fix it in position; the handle is then to be taken from No. 4, and the spindle inserted in the holes in the upright. To roll a bandage, pass the end under the brass wire extending between the uprights, bring it over the spindle, and make one or two turns to secure it, the operator moving the handle away from him at the upper part of the circle, and so on. When the end is secured, the remainder can be wound up quickly and evenly, with a little practice, and when this is done the spindle is withdrawn and the bandage is ready for use.

† In No. 2 there are the beds for two stands for scales, the uprights for them are in leather slips on top of slide, and these merely require to be inserted in the beds when required for use.

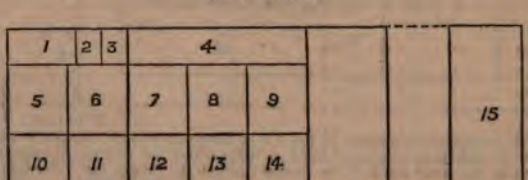
Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

		No. in Slide.
Front of Slide—		
Glass measures, minim, 2-oz. and 10-oz.	No. 3	1
Metal measure, pint	„ 1	1
Pewter ounce measure	„ 1	2
Gallipots, in sorts	nest 1	2
Empty tins for pills, &c.	No. 8	3 & 4
Pewter basins, 11-inch	„ 2	5
Slabs, 10-inch	„ 2	6
Spaces left for books and stationery		7 & 8
Ruler, 12-in.	No. 1	7
Bath Thermometer	„ 1	9
Bottles, 4-oz.	„ 19	Drawer 9
„ 8-oz.	„ 12	„ 9
Paper pill boxes, papers	„ 2	„ 9
Chip „ „	„ 1	„ 9
Corks, assorted	gross 1½	„ 9
Inkstands	No. 2	„ 10
Inkpowders	packets 2	„ 10
Steel pens	boxes 2	„ 10
Penholders	No. 4	„ 10
Blacklead pencils	„ 2	„ 10
Blank labels	„ 200	„ 10
Ink eraser and india-rubber	„ 1	„ 10
Irrigators, set of 3	set 1	„ 11
Sponges, in bag	No. 36	„ 11
Hone, in mahogany	„ 1	„ 12
Pewter syringes, male	„ 12	„ 13
Glass syringes, in tin cases	No. 6	Drawer 13
Oiled silk	yds. 6	„ 14
Trusses, reversible	No. 4	„ 15
Suspensory bandages	„ 6	„ 15
Skins of leather	„ 6	„ 16
I. R. tubing	yds. 18	„ 16
Stethoscopes, vulcanite	No. 2	„ 16
Air cushions	„ 6	„ 16

The small tins in Nos. 3 and 4 are for pills or powders, ready for administration, the components of which the medical officer can vary from time to time, to meet the forms of disease then prevailing.

SLIDE No. 5.



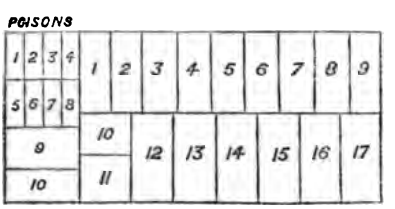
Gallipots, in sorts	nest 4	1
Packthread	lb. 1	2
Broad tape	pieces 6	3

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

		No. in Slide.
Six tins, containing plaster, viz :—		
Emp : Cerat : Saponis	yds. 8	4
„ Icthyocolla	„ 20	4
„ Adhesive, Leslie's ½-inch tapes, 12 tapes, 12 yards each .		4
„ „ „ 1 „ 6 „ 10 „ .		4
„ „ „ 6 „ 14 „ .		4
Lamp wick, colza	yds. 2	4
„ paraffin	„ 1	4
Five tins of Plaster of Paris	lbs. 30	5 to 9
Five large tins containing:		
Two Ol : Lini	lbs. 12	10 & 11
„ Olivæ	„ 6	12
„ Ricini	„ 6	13
Colza oil	pints 5	14
Front of Slide—		
Corkscrews	No. 2	15
Palette knives..	„ 3	15
Counter scissors	„ 2	15
Tin funnel	„ 1	15
Compo : mortars and pestles..	„ 2	15

SLIDE No. 6.



Poison Subdivision	Acid hydrocyan : dil:..	oz. 2	1
	Hydrarg : iodid : rub :	„ 2	2
	Atropine, Savory & Moore's Hypodermic discs,	No. 250	3
	Ergotine, Savory & Moore's Hypodermic discs,	No. 250	4
	Hydrarg : perchlorid :	oz. 2	5
	Liquor strychniæ	„ 2	6
	Morphiæ acet : Savory & Moore's Hypodermic discs	No. 1,000	7
	Strychnia, Savory & Moore's Hypodermic discs	No. 250	8
	Grain scales and weights	set 1	9
	Compo : mortar and pestle	No. 1	10
	Minim measure	„ 1	10
	Knife	on door	10
Open part.			
Vacant..			1
Six 12-oz. capped bottles. Chloroform		lbs. 6	2 to 7
Liq : Ammon : Fort:..		„ 1	8
Tinct : Iodi		„ 1	9

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

		No. in Slide.
Three tins, containing—		
Ext: Belladon:	oz. 8	10
„ Hyoscyam:	„ 8	10
„ Opii	„ 8	10
Two tins, containing—		
Pil: Coloc: et Hyoscyam	lb. 1	11
„ Hydrarg	„ 1	11
Acid Carbolici	„ 2	12
Aqua Distill:	„ 2	13
Glycerine	2 lb. 8 oz.	14
Water glass	lb. 2	15
Cupri Sulph:	lb. 2	16
Salicin:	oz. 12	17
SLIDE No. 7.		
(*See slide No.* 1.)		
Top Division—Eleven 1-lb. bottles:		
Acid Tartaric Pulv:	lb. 1	1
Camphor	oz. 8	2
Catechu Pulv:	„ 8	3
Chloral Hydrat	lb. 1	4
Potass: Bicarb: Pulv:	„ 1	5
„ Chlorat	„ 1	6
„ Tart: Acid	„ 1	7
„ Iodid	„ 1	8
Pulv: Ipecac: Co:	oz. 8	9
Rhei Pulv:	„ 8	10
Zingiber Pulv:	„ 8	11
Bottom Division—Nine 2-lb. bottles.		
Acaciæ Pulv:	1 lb.	12
Alum Pulv:	2 „	13
Ammon: Carbon:	1 „	14
Ipecac: Pulv:	1 „	15
Plumbi Acet:	2 „	16
Potass: Nitrat: Pulv:	2 „	17
Pulv: Jalapæ Co:	1 lb. 8 oz.	18
Quiniæ Sulph:	12 „	19
Sodæ Bicarbon:	2 lb.	20
COMPARTMENT E.		
Calico	50 yds.	1
Carded cotton	6 lbs.	1
Flannel	20 yds.	1
Linen sheeting	30 „	1
Plaster, adhesive, Leslie's, tins containing:—		
½-inch tapes, 12 yards each	No. 5	1
1 „ 10 „	„ 11	1
6 „ 14 „	„ 5	1
Plaster, soap cerate, 2 tins containing 8 yards each	..	1
Transfusion apparatus (Roussel's)	..	1
Urinometer apparatus	..	1
Waterproof cloth, German	30 yds.	1
Bottles for wine	No. 18	2
Kettle, tin, tea, 2 gallons	„ 1	3
Saucepans, cooking, nest of 4	„ 1	3
Large tin, wood lined, for salt	14 lbs.	4
Tin for pepper	3 „	4
„ mustard	3 „	4
Essence of meat	20 „	4

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

The roll of waterproof cloth to be placed in No. 1 against the central partition, the calico over this, the flannel and linen outermost against the side; the carded cotton will then be placed in the back between the linen and calico, and the vacant space towards the door of the compartment will receive the plaster tins for which there is not room in Slide 5, Compartment D.

COMPARTMENT F.

TWO DRAWERS OF INSTRUMENTS.

No. 1. *Top.*—

Bandage for bloodless operations	No. 1
Catheters, case of	„ 1
Cauterizing irons	„ 3
Chloroform inhaler	„ 2
Cupping instruments	Sets 1
Dressing cases for Orderlies	No. 5
Eye instruments	Set 1
Hypodermic syringes	No. 3
Ophthalmoscope and laryngoscope	„ 1
Pocket case of instruments..	„ 1
Post-mortem instruments	Case 1
Stomach pump	No. 1

No. 2.—

Amputating case	No. 1
„ „ spare knives	Case 1
General case of instruments	No. 1
Gypsum bandage instruments	Case 1
Resection instruments	„ 1

DIVISION UNDER DRAWERS.

Sugar in tin box	20 lbs.	No. 3
Rice „	20 „	„ 5
Tea „	3 „	„ 4
Arrowroot „	9 „	„ 4

COMPARTMENT G.

Recess in Roof, over Box Seat.

Portable operating table, No. 1.
Liston's long splints, No. 6.
Splints, long, with foot pieces, &c., No. 2
Smithson's anterior splints, No. 2.

The operating table goes into the centre of this compartment. On its left are placed six long thigh splints and two Smithson's wire splints; on its right are two long thigh splints with foot pieces, and the other apparatus alluded to above. (*See* C, note on fracture apparatus.)

The wire of the Smithson's splints is in the form of a long loop, with cross-pieces regulating the breadth; the sides, however, are quite straight, as the medical officer, when he comes to apply it, can easily bend these at such points and to such angles as he may find to suit the case.

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

COMPARTMENT H.

Box under Driving Seat.

Tin of paraffin oil, about 1 gallon	No. 1
Lamp, operating, No. 1	„ 2
Cover for rear of wagon	„ 3
Pegs, tent, No. 10..	„ 3

The tank below, in front of the hind axle, is similar to that attached to the ambulance wagon. To fill it, screw the leather funnel to the end of the long tube and attach the funnel to the hook at the right side of the wagon. Open the large stopcock at the lower part of the tank, also the small one above to allow the air to escape, then pour water into the funnel until the tank be filled. When full, close the lower stopcock, and then the small one above, unscrew the funnel from the tube, and hang it to the proper hook below the bed of the wagon. To obtain water from the tank it is only necessary to open the large stopcock, placing a vessel below the end of the tube to receive it. Should it not flow freely, the small stopcock above may be opened.

Note on Fracture Apparatus.

As the preparation of the necessary apparatus for securing fractures occupies considerable time, even when the materials are at hand, it was thought advisable to arrange a number of these containing everything required to put up fractures in the first instance, at least, so as to save valuable time during the hurry and bustle of an action, or of receiving large numbers of wounded immediately after one. Such combinations necessarily limit the selection of the surgeon as to the means he is to employ, but the increased importance of having ready to his hand, when so much pressed, a set of apparatus that will fulfil his object satisfactorily, must be taken as adequate compensation for this not being in every instance in all respects as he might have wished it to be, and when the pressure is removed, it will always be in his power to substitute something else that may be more suitable to the particular case.

As the most generally useful kind of splint is the ordinary scored and lined wood splint, this was selected for the purpose, but pads are required for these, and the means of securing the whole to the limb. Tow, undoubtedly, forms the best pad for splints in most cases, but it occupies much time to prepare, and with discharging wounds would become very soon so soiled as to require to be completely changed. An effort was made to have waterproof cases stuffed with tow, so as to avoid the latter difficulty, but the constant applications of such material to the skin was found to create so much irritation that it had to be abandoned. Thin mats of cocoanut fibre, or coir, were then tried, with the wove part next the splint, and the free ends of the fibres towards the limb, these were found to possess a sufficient degree of elasticity to afford the requisite support to a fracture, while the openness of the texture favoured the coolness of the part, and a double fold of linen between the coir and the skin was found to protect the latter sufficiently from the roughness of the coir fibre. The coir mats, too, could be washed and disinfected with any of the customary

Description of Pharmacy Wagon.

solutions for that purpose, and were still suitable for the treatment of such injuries.

The selection of apparatus was based on these details: a set for the arm, fore-arm, or leg includes two scored wood splints, two coir pads (those for the leg with holes made in them for the malleoli), two pieces of linen folded to cover the face of the pads, and four pieces of tape, each sufficiently long, when doubled, to go over the splints when applied to the limb, and allow of one end being passed through the loop and tied to the other. Any fracture of the arm or leg can be completely secured by tapes, and in this way each tape can be tightened or loosened as desired, without touching the others or disturbing the limb, and the position of the ends of the bone can be ascertained readily from day to day without undoing the splints. For the thigh, in addition to the above articles, a long splint, a perineal bandage, a piece of linen 4 feet long, 4 inches broad, with the ends for $1\frac{1}{2}$ feet spread with adhesive plaster, to be applied to the leg for extension, and a piece of linen sheeting of $1\frac{1}{4}$ yards by 1 yard, are provided. After applying the short splints to the limb, if desired, and the plaster bandage to the leg for extension, the long splint is to be laid over the edge of the short side of the large piece of linen, and is to be rolled up in this, leaving enough free to pass under and round the thigh, and to admit of the free edge being secured to the upper side of the splint by pins or stitches. By this method the limb can be supported equally well as by the usual plan of bandaging over the splint from the foot upwards, while the saving of time in the first instance, and the ease with which the sheeting can be removed, if desired, have much to recommend it where there are many serious wounds to attend to.

In compartment G are two long splints with foot-pieces; these have the other portions of the apparatus for fractured thigh, enumerated above, tied up with them.

Should it be desired to treat a fracture with an interrupted splint, there are six galvanised iron brackets provided, each with the requisite number of screws tied to it; a long splint may be cut in such a position as may be suitable for the particular case, and one of these brackets applied to keep the ends separate over the wound.

There are several other varieties of splints which are in ordinary use, and which require no special notice. Three of Dr. M'Nalty's, however, for severe injuries of the leg, will, no doubt, prove very useful in appropriate cases.

As it may be found convenient to employ extension, with a weight regulated to the case, six single pulleys with short pieces of line are provided. With one of these pulleys tied to a post at the foot of the patient's bed, and the line passed through it, the surgeon may exert the degree of traction he desires by fastening one end to the limb, and by attaching a bag of earth or sand to the other end, varying the quantity to suit his requirements.

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

Contents of the different Cases of Instruments in the Pharmacy Wagon.

Amputating Case.

1 ordinary amputating saw.
1 finger saw.
2 10½-in. straight one-edged amputation knives.
2 9-in. straight one-edged amputation knives.
2 7½-in. straight one-edged amputation knives.
2 5½-in. straight one-edged amputation knives.
1 knife to scrape off periosteum.
4 artery forceps.
1 tenaculum.
1 spring forceps.
1 screw tourniquet, large.
1 field screw tourniquet.
1 Liston's straight-bone forceps.
6 large sewing needles.
12 acupressure needles of sizes.
24 surgical needles.
6 scalpels.
Silk for ligatures.
Catgut.
Wax.
Wire for sutures.
1 needle for inserting wire.
1 scissors.

Case of Amputating Knives and Scalpels.

4 10½-in. straight one-edged amputation knives.
4 9-in. straight one-edged amputation knives.
7½-in. straight one-edged amputation knives.
2 5½-in. straight one-edged amputation knives.
2 knives to scrape off periosteum.
2 scissors.
12 scalpels.

Bandages for Bloodless Operations.

1 coil india-rubber webbing.
1 tourniquet.
1 staff.

Case of Catheters.

12 silver and nickel male catheters, of sizes.
12 elastic gum catheters, of sizes.
6 elastic bougies.

Cupping Instruments.

1 bottle.
6 cupping glasses.
1 scarificator.
1 torch or lamp.

Dressing Case for Orderlies.

1 clasp knife, long-bladed.
1 pair strong scissors.
1 large spatula.
1 probe and director, combined.
1 dressing forceps.
Skein of thread.
6 needles, common.
Pins, a supply.

Eye Instruments.

1 straight iridectomy knife.
1 curved " "
1 Weber's canaliculus "
1 Bowman's puncture "
2 linear knives.
1 Dixon's cataract knife.
1 Desmarre's retractor.
1 eyelid " (inside).
1 " " (outside).
1 " " Samder's.
1 pricker.
1 Scarpa's needle.
1 broad "
1 Beer's "
1 silver spatula.
1 pair curved iris forceps.
2 " curved scissors.
1 " straight "
1 " Maunder's iris scissors.
2 " straight forceps.
1 " cilia forceps.
1 set Bowman's probes.
1 vulcanized curette.
1 lens hook.
1 Bowman's stop needle.
1 " strabismus hook.
1 Taylor's vecta.
1 cystotome and curette.
1 double (platina) iris hook.
1 double spoon.

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

General Case of Instruments.

1 hernia knife.
1 tenotomy knife.
1 curved probed pointed bistoury.
1 straight „ „
1 „ sharp-pointed „
1 lithotomy knife.
1 grooved staff.
1 calculus scoop.
1 „ forceps.
1 Langenbach's double hook for tracheotomy.
2 silver double canulas for tracheotomy.
24 sewing and acupressure needles.
1 cutting pliers.
2 œsophagus forceps (one opening outwards and one from behind to before).
1 rectal trocar with canula.
1 trocar for paracentisis abdominis.
1 horsehair probang for œsophagus (Weiss).
2 polypus forceps, 1 straight, 1 curved.
1 hydrocele trocar.
2 tooth forceps.
1 tooth key, with 3 claws.
1 scissors.
1 Bellocq's canula.
1 Nelaton's probe.
2 subcutaneous injection syringes.
Silk for ligatures.
Catgut carbolized.
Wire for sutures, with needle.
1 aneurism needle.
Wax.

Gypsum Bandage Instruments.

Gypsum knife. | Gypsum scissors.

Ophthalmoscope and Laryngoscope Case.

1 ophthalmoscope. | 1 laryngoscope.

Pocket Case of Instruments.

No.	Articles.	Dimensions.
		Inches.
1	Probe, curved and straight, sharp-pointed bistouries, in one handle	$3\frac{7}{8}$
1	Symes' abscess knife and double-edge scalpel, in one handle	$3\frac{7}{8}$
1	Tenaculum and gum knife, in one handle	$3\frac{7}{8}$
1	Pair crooked scissors	$4\frac{3}{4}$
1	Spatula, German silver	$4\frac{3}{4}$
1	Bow dressing forceps	$4\frac{3}{4}$
1	Director and aneurism needle, plated	$4\frac{3}{4}$
1	Pair, artery forceps, fenestrated..	$3\frac{3}{4}$
2	Probes, plated	$4\frac{3}{4}$
1	Male and female silver catheter combined, caustic-case with palladium crayon..	$4\frac{3}{4}$
1	Clinical thermometer	4
1	Case for ditto, plated	$4\frac{1}{8}$
2	Lancets	$2\frac{1}{4}$
2	Dieffenbach's forceps	2
1	Silver hypodermic syringe, in case	3
6	Needles, plated	$2\frac{1}{2} \times 2\frac{1}{8}$
1	Tablet of silk and wire for sutures	
	All contained in a Morocco single-flapped case of the following dimensions	Length, $5\frac{1}{4}$. Breadth $2\frac{3}{8}$. Thickness, at clasp, $1\frac{1}{4}$.
	Total weight with instruments, $9\frac{1}{4}$ ozs.	

Description of Pharmacy Wagon.

DESCRIPTION OF PHARMACY WAGON—continued.

Post-mortem Instruments.

1 blow pipe.
1 cartilage knife.
1 chisel for opening spinal column.
1 forceps.
1 hammer.
1 hook fixed in handle.
1 set of hooks, chains.
3 long needles.
1 saw.
3 ordinary scalpels.
1 tang scalpel.
1 pair bowel scissors.
1 „ sharp-pointed scissors for dissecting.

Resection Instruments.

1 large Liston's bone forceps, curved.
1 forceps for grasping bone.
1 bow saw with 2 spare blades.
1 narrow straight saw.
1 saw with shifting back.
6 resection knives (2 pointed, 2 curved back, 1 button-ended, and 1 with blunt point).
2 strong pointed hooks.
2 blunt wood hooks, retractors.
2 raspatories, hook drooped and goat-foot shaped.
2 elevators (1 single, 1 double).
1 grooved chisel.
1 sequestrum forceps.
1 chain saw.
2 trephines, with trepan crown and shifting pyramid (1 of $\frac{13}{16}$ inch diameter 1 of $\frac{9}{16}$ inch diameter).
1 brush.
1 lenticular.
1 pair scissors.
2 American bullet forceps.
1 midwife's hinge bullet forceps.
1 Coxeter's bullet extractor.
1 long silver probe.

Stomach Pump.

1 foot for enema.
1 gag.
1 enema, angular.
1 do. straight.
1 wastepipe.
1 seat.
1 syringe, double, lever action.
1 tube, connecting, for enema.
1 „ œsophagus.

Contents of a Surgery Wagon for a Bearer Company.

APPENDIX No. 4.

LIST OF CONTENTS OF A SURGERY WAGON FOR A BEARER COMPANY.

* The Medicines, Surgical Appliances, and Instruments are contained in 6 Baskets covered with hide, and lettered A, B, C, D, E, and F.

A. Medicines, &c.
B and C. Instruments and Surgical Appliances.
D. Surgical Appliances.
E. „ (Splints, &c.)
F. Reserve.

Medicines, etc.

Articles.		Quantity.	Letter of Basket in which the articles are placed.
Acid, Carbolic ..	oz.	12	A.
„ Gallic	„	1	A.
Ammon. Carbon.	„	8	A.
Argent, Nitrat	„	1	A.
Brandy	gall.	1	A.
Chloroform	lb.	4	A.
Chloral Hydrat	oz.	2	A.
Chlorodyne	„	4	A.
Cocoa and milk	tins	4	B and C. 2 B, 2 C.
Discs for hypodermic injection, Morphia		1,000	A.
Discs for hypodermic injection, Ergotine		750	A.
Ipecac. Pulv.	oz.	4	A.
Liq. Ammon Acet. Conc. ..	„	12	A.
Liq. Ferri, Perchlor. Fort. ..	„	12	A.
Liq. Morphia, for injections, gr. j., m. vi.		4	A.
Liq. Potass. Permang. ..	lb.	1½	A.
Mixt. for diarrhœa	„	1½	A.
Mustard leaves	tins	2	B.
Ol. Menth. Pip.	oz.	1	B.
Ol. Olivæ, Carbolized (1 to 50)	lb.	3	B.
Ol. Ricini	„	2	B.

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Articles.	Quantity.	Letter of Basket in which the articles are placed.
Medicines, &c.—continued.		
Ol. Terebinth .. .. lb.	1½	A.
Opii Pulv. .. .. .. oz.	2	A.
Pills, Hyd. Subchlor, gr. j. .. bottle	1	A.
" { Opii Pulv., gr. j. / Plumbi, Acet., gr. iij. } .. "	1	A.
" { Hyd. Subchlor, gr. ij., et / pil. Coloc. Co., gr. iij. } "	1	A.
" Pulv. Opii, gr. j. .. .. "	1	A.
" Quinine, gr. j. .. .. "	1	A.
Pulv. Ipecac. Comp. .. .. oz.	3	A.
Quinine .. .. .. "	16	A.
Soda, Tartarata .. .. lb. "	4 10	10 oz. A and 4 lb. B.
" Bicarbon .. .. "	10	A.
Spirit Ætheris, Nit. .. .. "	10	A.
" Ammon. Arom. .. lb.	1¼	A.
" Chloroformi .. .. oz.	12	A.
Tablets, Aromatic confection, ½ dram each } doz.	9	A.
" Opiate confection, 1 scruple each } "	12	A.
Tinct. Benzoin. Co. .. .. oz.	12	A.
" Opii .. .. .. "	12	A.
Ung. Cetacei .. .. .. lb.	1½	A.

Appliances, Instruments, &c.

Air cushions	6	3 D, 3 E.
Amputating knives .. .. set	1	D.
Aprons, attendants'	6	3 D, 3 E.
" Surgeons'	3	2 D, 1 E.
Arm slings, wire .. .. "	4	F.
Bandages, 1st dressing	100	25 B, 25 C, 50 F.
" for bloodless operations .	2	1 B, 1 C.
" Calico, 2½ in., 5 yds. long	200	50 B, 50 C, 100 D.
" " 1 " "	6	3 B, 3 C.
" " 1½ "	6	3 B, 3 C.
" " 3 " 8 "	500	50 B, 50 C, 100 D, 64 E, and 236 F.
" Flannel 4 " 8 yds. long	10	5 B, 5 C.
Basins, zinc, kidney-shaped, for washing wounds	4	A.
Bottles, 2-oz. and 4-oz. .. doz.	1½	A.
Camel-hair pencils	6	A.
Carbolized catgut	2	A.
Cardboard, 23 × 12 .. .. pieces	6	3 D, 3 E.
Chamois skin..	1	D.
Chloroform inhalers, with drop bottles	2	A.
Catheter, gum elastic.. .. set	1	A.
" Silver and silver plated "	1	A.
Cord .. .. oz.	8	B.
Corks, assorted .. .. doz.	6	A.
Corkscrew, compound	1	A.
Cotton wool .. .. .. lb.	3	8 oz. B, 8 oz. C, ½ lb. D, 8 oz. F.
Dressing tray	1	F.

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Articles.	Quantity.	Letter of Basket in which articles are placed.
Appliances, &c.—continued.		
Flannel, fine .. .. .. yds.	5	F.
„ for fomentations .. „	5	F.
Forceps, tongue	1	A.
Gutta-percha, for splints, 18 × 4 inches .. .. pieces	12	F.
Haversacks—(*For contents see end*)	12	F.
Hone	1	A
Horn cups, grad.	2	A
Instruments, resection case .. case	1	C.
„ surgeon's case .. „	2	1 D, 1 E.
Irrigators, with stop cocks. 3 ivory jets, with I. R. tubing	2	1 B, 1 C.
Labels, blank	200	A.
Lamps, operating, with match boxes	3	1 B, 1 C, and 1 E.
Linen sheeting .. .. yds.	20	10 D, 10 F.
Lint, fine .. .. .. lbs.	20	2 B, 2 C, 16 F.
Measures, minim	3	A.
„ pewter, oz.	6	2 each A, B, C.
„ 2 oz.	2	A.
Measuring tapes	2	1 B, 1 C.
Mortar and pestle	1	A.
Needles, stout sewing	50	A.
Oiled silk .. .. .. yds.	6	3 B, 3 C.
Old linen sheets	6	F.
Packthread .. .. .. oz.	8	C.
Pad cases for splints—		
Arm-jointed elbows .. sets	2	F.
Fore-arm .. .. .. „	2	F.
Leg and ankle .. .. pairs	4	F.
Thigh .. .. .. „	2	F.
Thigh, wood, shaped .. sets	2	F.
Paper, paraffin .. .. sheets	12	6 B, 6 C.
„ powder .. .. .. pkt.	1	A.
Pins .. .. papers	4	2 A, 1 B, 1 C.
„ 1st dressing	100	50 B, 50 C.
Pill boxes, nested .. .. doz.	¾	A.
Pill and palette knives	4	A.
Plaster, adhesive, tins, 8 yds. each, ½-in.	30	18 A, 6 B, 6 C.
„ „ „ 8 „ 1 „	36	10 A, 13 B, 13 C.
„ „ „ 6 „ 6 „	22	6 A, 6 B, 5 C, 4
„ isinglass .. .. yards	5	A.
Razor	1	A.
„ strop	1	A.
Retractors	4	A.
Scales and weights, with extra weights .. .. .. set	1	A.
Scalpels .. .. .. „	1	A.
Scissors .. .. .. prs.	5	1 pair each, A, B, C, D, and E.
Screwdriver, short, for trusses, A.M.D. supply	1	A.
Solidified soup	..	B.
Specification tallies .. .. books	6	4 A, 1 B, 1 C.
Cases with pencils for ditto ..	3	1 A, 1 B, 1 C.
Splints, arm, iron wire, with pads ..	30	18 F, 12 E.

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Articles.	Quantity.	Letter of Basket in which th articles are placed.
Appliances, &c.—continued.		
Splints, fore-arm, tinned wire, with pad cases	10	4 E, 6 F.
„ fore-arm, perforated zinc, with pads	10	5 E, 5 F.
„ arm supports, jointed, perforated zinc, with pads ..	2	E.
„ arm supports, jointed, tinned wire, with pad cases ..	2	E.
„ leg and ankle, tinned wire, with pad cases	5	3 E, 2 F.
„ leg and ankle, perforated zinc, with pads	5	2 E, 3 F.
„ long jointed, with pads ..	10	3 E, 7 F.
„ thigh, wood shaped, with pads	6	3 E, 3 F
„ „ tinned wire, with pad cases	6	2 E, 4 F.
Sponges, small, in 2 waterproof bags	10	A.
„ large..	3	E.
Spongio Piline, 18 by 18 .. pieces	4	2 D, 2 E.
Stethoscopes	2	1 B, 1 C.
Stomach pump	1	D.
Stopper Loosener	1	A.
Stump cushions	12	6 E, 6 F.
Sutures	20	10 B, 10 C.
Syringes, hypodermic	2	A.
Tape, broad, in 10 yard pieces, yds.	100	2 A, 4 B, 4 C.
Thread . .. . oz.	1	A.
Tooth instruments .. .. set	1	D.
Tourniquets, screw	6	3 B, 3 C.
Tow, surgeon's . .. .. lb.	10	2 D, 8 F.
„ carbolized .. .. „	5	1 B, 1 C, 3 F.
Trocar, curved, for bladder	1	A.
Trusses, steel..	4	2 D, 2 E.
V. I. R. cloth.. .. .. yds.	6	D.
Waterproof dressing..	6	3 B, 3 C.
Water bottles, copper, tinned, with drinking cup and straps complete.	12	F.
Waterproof cloth .. .. yds.	4	D.
Wax candles	24	12 B, 12 C.
„ „ and matches in tin boxes, with candlesticks	3	1 A, 1 B, 1 C.
Wire nippers .. .. .. prs.	2	A.
„ silver plated .. .. oz.	1	A.
„ telegraph wire .. .. feet	20	A.

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Contents of Baskets in Bearer Wagon.

Articles.	Quantity.
A. MEDICINE BASKET.	
Acid, carbolic	12 oz.
„ gallic	1 oz.
Ammon, carbon	8 oz.
Argenti, nitrat	1 oz.
Brandy	1 gall.
Chloral hydrat	2 oz.
Chloroform	4 lbs.
Chlorodyne	4 oz.
Discs for hypodermic injection, morphia	1,000
„ „ „ ergotine	750
Ipecac. pulv.	4 oz.
Liq. ammon. acet. conc.	12 oz.
„ ferri. perchlor. fort.	12 oz.
„ morphia, for injections (grain 1 in mvi)	4 oz.
„ potassæ permang.	1½ lb.
Mixt. pro diarrhœa	1½ lb.
Mustard leaves	2 tins.
Ol. menthæ. pip.	1 oz.
„ olivæ, carbolized, 1 to 50	3 lbs.
„ terebinth	1½ lb.
Opii. pulv.	2 oz.
Pills, hyd. subchlor. gr. j	12 doz.
„ Rj. opii. pulv., gr. j, plumbi. acet. gr. iij	6 „
„ Rj. hyd. subchlor, gr. ij. pil. coloc. co. gr. iij	6 „
„ pulv. opii., gr. j	12 „
„ quiniæ, sulph. gr. j	9 „
Pulv. Ipecac. co.	3 oz.
Quiniæ, sulph.	16 oz.
Soda, tartarata	10 oz.
Sodæ, bicarbon	10 oz.
Spirit, ætheris nitrosi	10 oz.
„ ammon. arom.	1¼ lb.
„ chloroform	12 oz.
Tablets for diarrhœa, aromatic confection (½ dram each)	9 doz.
„ „ opiate confection (1 scruple each)	12 doz.
Tinct. benzoin comp.	12 oz.
Tinct. opii	12 oz.
Ung. cetacei	1½ lb.
Basins, zinc, kidney-shaped, for washing wounds	4
Bottles, 2 oz. and 4 oz.	1½ doz.
Camel hair brushes	6
Candle and wax matches	1 tin box.
Carbolized catgut	2 oz.
Catheters, elastic gum	1 set.
„ silver and silver-plated	1 „
Corks, assorted	6 doz.

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Articles.	Quantity.
Contents of Baskets—continued.	
Corkscrew, compound	1
Forceps, tongue	1
Horn, cups, grad.	2
Hone	1
Inhalers for chloroform, with grad. bottles	2
Knives, pill and palette	4
Labels, blank	200
Measures, minim	3
„ 2 oz.	2
„ pewter, ounce	2
Mortar and pestle, composition	1
Needles, stout, sewing	50
Plaster, adhesive, ½-inch wide, 8 yards long	18 tins.
„ „ 1 „ „ 8 „ „	10 „
„ „ 6 „ „ 6 „ „	6 „
„ isinglass	5 yds.
Pill boxes, nested	¾ doz.
Pins	2 papers.
Powder papers	1 packet.
Razor	1
„ strop	1
Retractors	4
Scales and weights, with extra weights	1 set.
Scalpels	1 „
Scissors	1 pair.
Screwdriver, short, for trusses	1
Specification tallies	4 books.
Cases with pencils for ditto	1
Sponges, surgeons'	10
Stopper loosener	1
Syringes, hypodermic	2
Tape, broad (10 yards each)	2 packets.
Thread	1 oz.
Trocar, for bladder	1
Wire, silver plated	1 oz.
„ Nippers	2 pairs.
„ Telegraph	20 feet.
B. BASKET.	
Bandages, calico, 1-inch wide, 5 yards long	3
„ „ 1½ „ „ 5 „ „	3
„ „ 2½ „ „ 5 „ „	50
„ „ 3 „ „ 8 „ „	50
„ 1st dressing	25
„ flannel, 4 inches wide, 8 yards long	5
„ for bloodless operations	1
Candle and matches, in tin box, as candlestick	1
Candles, wax	12
Carbolized tow	1 lb.
Castor oil	2 „
Cocoa and milk (2 tins)	1 „
Cotton wool	1 „

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Articles.	Quantity.
Contents of Baskets—continued.	
Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets..	1
Lamp, hospital, operating, with match boxes	1
Lint, fine	2 lb.
Measures, pewter, oz.	2
Oiled silk	3 yds.
Paraffin paper	6 sheets.
Pins	1 paper.
Pins, 1st dressing	50
Plaster adhesive, ½-inch wide, 8 yards long	6 tins.
" " 1 " " 8 " "	13 "
" " 6 " " 6 " "	6 "
Rochelle salts, in powder	4 lb.
Scissors .. .. pairs	2
Solidified soup	..
Specification tallies	1 book.
Cases with pencils for ditto	1
String (laid cord)	8 oz.
Stethoscope	1
Suture, or hair lip pins	10
Tape, broad, in 10 yard pieces	4
" measure	1
Tourniquets, screw..	3
Waterproof dressing	3 yds.
C. BASKET.	
Bandages, calico, 1-inch wide, 5 yards long	3
" " 1½ " " 5 " "	3
" " 2½ " " 5 " "	50
" " 3 " " 8 " "	50
" 1st dressing	25
" flannel, 4 inches wide, 8 yards long..	5
" for bloodless operations	1
Candle and matches, in tin box, as candlestick..	1
Candles, wax	12
Carbolized tow	1 lb.
Cocoa and milk (2 tins)	1 "
Cotton wool	8 ozs.
Instruments, resection, case of	1
Irrigator, with stop cock, 6 ft. india-rubber tubing, and 3 ivory jets..	1
Lamp, hospital, operating, with match boxes	1
Lint, fine	2 lb.
Measures, pewter, ounce	2
Oiled silk	3 yds.
Paraffin paper	6 sheets.
Pins	1 paper.
Pins, 1st dressing	50
Plaster, adhesive, ½ inch wide, 8 yards long	6 tins.
" " 1 " " 8 " "	13 "
" " 6 " " 6 " "	6 "
Scissors	1
Specification tallies	1 book.
Cases with pencils for ditto	1

Contents of a Surgery Wagon for a Bearer Company.

Contents of a Surgery Wagon—continued.

Articles.	Quantity.
Contents of Basket—continued.	
Spring packthread	8 ozs.
Stethoscopes	1
Sutures, or hair lip pins	10
Tape, broad, in 10 yard pieces	4 pieces.
" measure	1
Tourniquets, screw	3
Waterproof dressing	3 yards.
D. Basket.	
Air cushions	3
Amputating knives	1 set.
Aprons, attendants'	3
" surgeon's	2
Bandages, calico, 2½-inch, 5 yards long	100
" " 3 " 8 " "	100
Cardboard	3 pieces.
Chamois skin	1
Cotton wool	1½ lb.
Instruments, surgeon's, case of capital	1
Instruments, tooth	1 set.
Linen sheeting	10 yds.
Scissors	1 pair.
Spongio piline	2 pieces.
Stomach pump	1
Tow	2 lbs.
Trusses, steel	2
V. I. R. cloth	6 yds.
Waterproof cloth	4 "
E. Basket.	
Air cushions	3
Aprons, attendant's	3
" surgeon's	1
Bandages, calico, 3-in., 8 yds.	64
Cushions for stumps	6
Cardboard .. pieces	3
Instruments, surgeon's, case of capital	1
Lamp, hospital, operating, with match boxes	1
Sciissors	1
Sponges, large	3
Spongio piline .. pieces	2
Splints, arm, iron wire, with pads	12
" fore-arm, tinned wire, with pad cases	4
" " perforated zinc, with pads	5
" arm supports, jointed, perforated zinc, with pads	2
" " " tinned wire, with pad cases	2
" leg and ankle, tinned wire, with pad cases	3
" " " perforated zinc, with pads	2
" long jointed, with pads	3
" thigh, wood shaped, with pads	3
" " tinned wire, with pad cases	2
Trusses, steel	2

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Articles.	Quantity.
Contents of Basket—continued.	
F. RESERVE BASKET.	
Bandages, calico, 3-in. 8 yds. long	236
„ 1st dressing	50
Carbolized tow	3 lb.
Cotton wool	8 oz.
Cushions for stumps	6
Dressing tray	1
Flannel, fine	5 yards.
„ fomentation	5 „
Gutta-percha	12 pieces.
Lint, fine	16 lb.
Linen sheets, old	6 yards.
Linen Sheeting	10 yds.
Plaster, adhesive, 6-inch (6 yards each)	4 tins.
Pad cases for splints—	
Arm-jointed elbow sets	2
Fore-arm „	2
Leg and ankle pairs	4
Thigh „	2
Thigh, wood shaped sets	2
Splints, arm, iron wire, with pads	18
„ fore-arm, tinned wire, with pad cases	6
„ „ perforated zinc, with pads	5
„ leg and ankle, tinned wire with pad cases	2
„ „ perforated zinc, with pads	3
„ long jointed, with pads	7
„ thigh, tinned wire, with pad cases	4
„ „ wood shaped, with pads	8
„ arm slings, iron wire	4
Tow	8 lb.
Also 12 haversacks and water bottles, complete.	

Contents of Haversack.

Articles.	Quantity.
Sal volatile, in stoppered bottle and boxwood case oz.	2
Minim measure, in leather case	1
Grad. horn cup	1
Calico bandages	2
First dressing triangular bandages	8
Lint oz.	4
Oiled silk yard	½
Isinglass plaster „	1
Plaster, adhesive, 8 yards, ½-in. tapes tin	1
„ „ 8 „ 1-in. „	1
Sponges, in waterproof bag	2
Field tourniquets	2
Wax candle and matches tin box	1
Arm splints, with pads, 10 and 12 in pair	1
Orderlies dressing case	1

Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

The Wagon also contains.

Poles, wood, FH { 16 feet .. 1
7 „ .. 2 }
An operating table, with mattress.
A tent.
3 Canteens, wood, HP A, B, and C.
2 Divisional comfort boxes, Nos. 1 & 2.
1 Water Bucket.

Contents of A, B, and C Canteens for Surgery Wagon of Bearer Company.

Description.		No.
A.		
Chisels, ripping ..		2
Cups, drinking, tin	half pint	25
	pint	25
Ladles, iron, tinned, soup		2
Matches, wax	box	1
Pots, tin, tea, 5 pints		2
Spoons, table, German silver		50
Saucepans, nests of 8 (12 qts. to 1 pint)	nest	1
Triangles with tubular joints, and chain with hook attached		2
Lamps, hand, small, FH		2
Box A, on rollers, with lock and key, and sunk handles		1
Straps		2
B.		
Blue worsted and thread		..
Basins, hospital canteen, zinc, 9-in.		4
Bottle, tin, oil, square, with sealed top, 2 gallons		1
Chisels, ripping		2
Feeder, for oil		1
Hammer, claw, small, 20 oz.		2
Lamps, hand, small, FH		2
Lanterns (bull's-eye), Police		2
Needles, viz., 2 packing, 25 darning (No. 15), and 25 sewing (No. 7)	packet	1
Pans, bed, zinc		2
Pots, zinc, chamber		4
Scissors, lamp, with guard	pair	1
Stools, close, field service, complete, consisting each of—		
Zinc pan		
Tin lid or covers		
Three legs, tubular iron		2
Triangles		
Ring top		
Urinals, pewter		2
Box B, on rollers, with lock and key, and sunk handles		1
Straps		2

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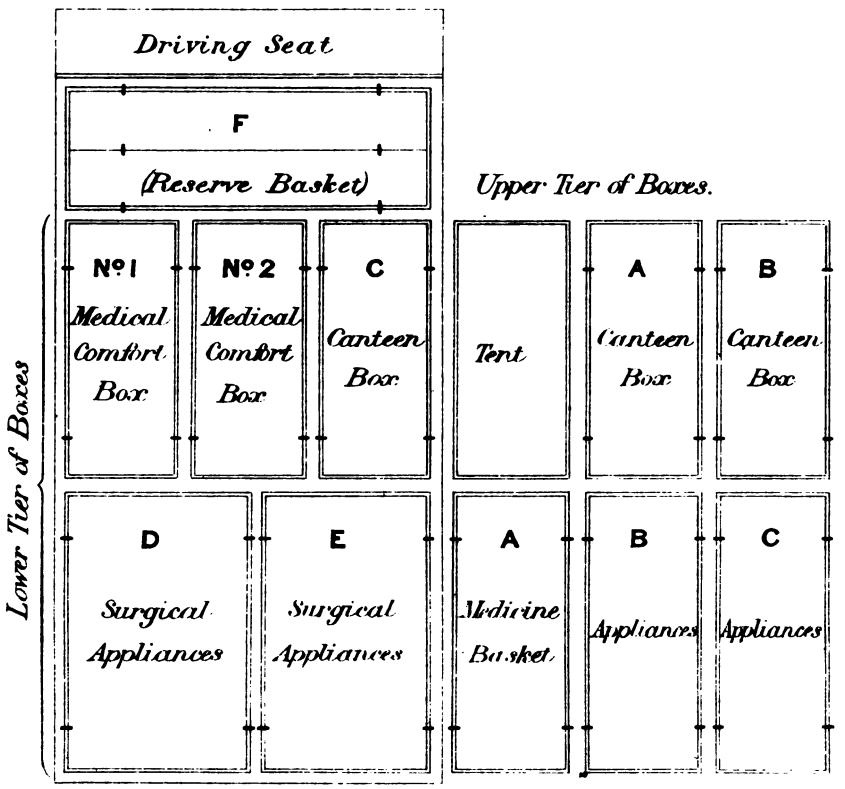

Plan of Surgery Wagon, shewing the mode of packing the baskets and boxes, &c.

F Large Reserved Basket is placed in the forepart of the wagon and need not be removed, access can be had to the contents from the box seat; the Medical Comfort Boxes 1 and 2, and the Canteen Boxes A, B and C, form two tiers in the centre of the wagon; the A and B Canteens, with the Tent, constituting the upper tier; at the rear of the wagon are Baskets D and E containing surgical appliances, over which are placed Baskets A, B and C; the Operating Table is slung by means of straps to the hoops of the wagon over Basket F, the Mattress lying on the basket.

The Tent and Flag Poles will be secured to the rails on outside of the wagon.

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Contents of a Surgery Wagon for a Bearer Company.

CONTENTS OF A SURGERY WAGON—continued.

Description.	No.
Contents of Canteens—continued.	
C.	
Towels, hand, hospital pattern	24
Flannel, white, 27 inches wide.. yards	6
Lanterns, coloured red, HP marquee	2
" (bull's-eye), Police	6
Flags, FH, white, with red cross, triangular directing, 4 feet square	2
Filter, silicated carbon in metal case, with 2 indiarubber tubes and 2 wood taps	1
Box, on rollers, with lock and key, and sunk handles	1
Straps	2

Contents of Medical Comfort Boxes Nos. 1 and 2 for Surgery Wagon of a Bearer Company.

Description.	No.
No. 1.	
Brandy, bottles containing ⅛th of a gallon	24
Corkscrew, folding	1
Box, wood, medical comfort, divisional, No. 1	1
No. 2.	
Extract of meat (in 1 lb. tins) lbs.	21
Extract of meat in ¼ lb. jars "	1
Arrowroot "	4
Candles, wax or stearine, 6 to the lb. "	4½
Knife for opening tins	1
Measures, set of (quart, pint, ½-pint, ¼-pint)	1
Mustard ozs.	10
Pot, mustard, pewter	1
Pepper lbs.	1
Castor, pepper	1
Salt lbs.	3
Salt cellar, wood	1
Soap lbs.	4
Solidified soup	6
Sugar, crushed lump lbs.	18
Tea, black "	12
Box, wood, medical comfort, divisional, No. 2	1

For mode of packing surgery wagon, *see* plan attached.

Transport required for one Bearer Company, &c.

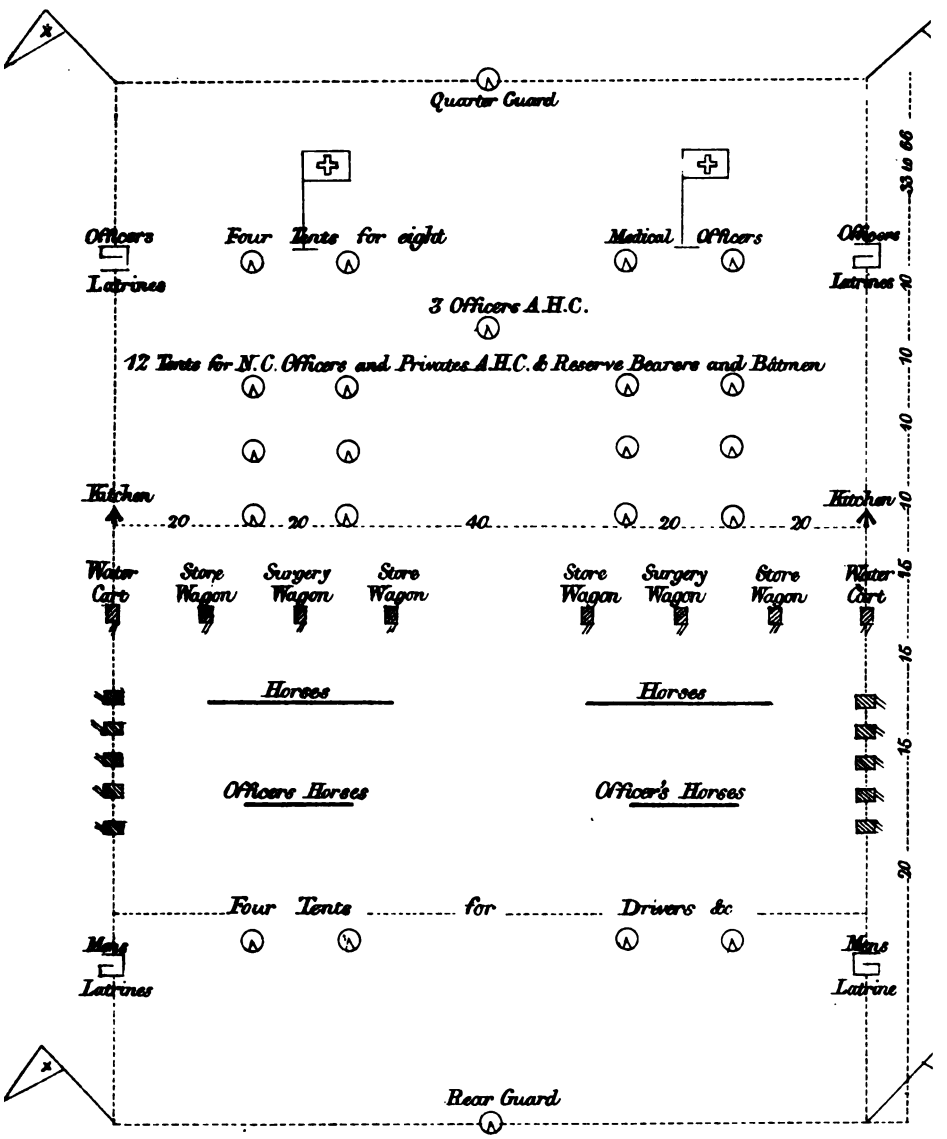
No. 3.—Transport required by one Bearer Company in the Field (including 1st and 2nd Line of Ambulance Wagons.)

	Articles to be conveyed.	Number.	Weight.	Carriages. G S. Wagon, 4-horsed.	Wagon for Equipment, 2-horsed.	Carts, 2-horsed. Water-cart.	Carts, 2-horsed. Supply.	Surgery Wagon 2-horsed.	Ambulance Wagon, 2-horsed.	Total.	Horses.	Drivers.	Remarks.
			Lbs.										
1st Line	Operating Tents (double circular, without lining)	2	200	...	...	...	...	2	...	2	4	2	§ Detail of Equipment, *vide* Medical Regulations.
1st Line	§Equipment for dressing stations	...	1,400	...	...	...	...	2	...	2	4	2	
1st Line	Axes, hand...	28	56	...	2†	...	...	...	...	2	4	2	For pattern of carriages and tents, *see* Detail No. 2.
1st Line	Blankets	195	780	...	2†	...	...	...	...	2	4	2	
1st Line	Straps, to secure blankets	‡16	...	...	2†	...	...	...	...	2	4	2	‡ Any pattern available; eight to every 100 blankets.
1st Line	Buckets (canvas)	17	12	...	2†	...	...	...	...	2	4	2	
1st Line	Kettle (Flanders)	25	212	...	2†	...	...	...	...	2	4	2	† The bulky nature, and not the weight of the load, necessitates the use of a wagon in place of a cart.
1st Line	Ropes (25 yards)	7	175	...	2†	...	...	...	...	2	4	2	
1st Line	Picketing implements { posts	42	231	...	2†	...	...	...	...	2	4	2	
1st Line	Picketing implements { mauls...	3	24	...	2†	...	...	...	...	2	4	2	
1st Line	Officers' baggage...	12	720	...	2†	...	...	...	...	2	4	2	
1st Line	„ cooking pots	...	80	...	2†	...	...	...	...	2	4	2	
1st Line	Carriage for 60 patients	...	...	...	...	2	...	...	10	12	24	12	
1st Line	Supply purposes (current day's rations)	...	...	...	...	...	1	...	...	1	2	1	
1st Line	Add for Spare	...	...	...	..	...	...	...	...	...	6	3	
1st Line	Total	...	1,600	...	2	2	1	2	10	17	40	20	* If suitable spring carriages are procurable, these carriages, with their drivers, horses, and harness may be drawn from local sources.
1st Line	Total	...	2,290	...	2	2	1	2	10	17	40	20	
2nd Line	Carriage for 138 patients...	...	...	...	...	...	...	...	23*	23	46	23*	
	Total 1st and 2nd Line	...	...	...	2	2	1	2	33	40	86	43	

If Tents, &c., for Officers and Men are carried, the following will be added:—

2nd Line	Tents, &c., for Officers 6	23	2,070	2	...	...	...	...	...	2	8	4	
2nd Line	„ „ Men 17												
2nd Line	Blankets, horse (does not include Medical Officers)...	101	758										
	Grand Total	...	...	2	2	2	1	2	33	42	94	47	

Plan of Encampment for a Bearer Company.



Dancerfield Lith 22. Bedford St Covent Garden.

APPENDIX No. 6.

No. 4.—Detail of a Field Hospital* of an Army Corps, with Transport.

Officers and Men.	Cadre.	To be added on taking the Field. Militia Reserve.	To be added on taking the Field. A. S. C.
Officers.			
Surgeon-Major (in charge)	1	...	...
Surgeons-Major	2	...	...
Surgeons	4	...	...
Other Officers.			
Captain of Orderlies	1	...	...
Total Officers	8	...	...
N.-C. Officers and Men.	A. H. C.		
Serjeant Major (Steward)	1	...	...
Colour-Serjeant (Assistant Steward)	1	...	...
,, (Wardmasters)	2	...	...
,, (Compounder in charge)	1	...	...
Serjeant (Compounder)	1	...	...
,, (Storekeepers)	2	...	...
,, (Principal Medical Officer's Clerk) ...	1	...	...
,, (Cooks)	2	...	...
2nd Corporals	4	...	...
Privates (4 Assistant Cooks)	22	...	...
Drivers	...	... / ...	8† / 14
Bâtmen, &c.	...	8	...
Total N.-C. Officers and Men ...	37	8	22
Total Cadre { Officers	8	30	
Total Cadre { A. H. C....	37		
Total to be added on taking the Field ...	30		
Grand Total	75		

Horses, Saddlery and Harness.	Number.
Horses.	
Riding { private ...	3
Riding { public	5
Draught ... ... {	16† / 28
Total Horses ...	52
Saddlery.**	
Riding	5
Harness.	
Double sets interchangeable, head or wheel ...	8† / 14

Tentage and Camp Equipment.	Number.
Tents §	
Operating Tents (double circular, without lining) ...	2
Bell Tents (100 lbs.), ditto	50
Carriages.	
Wagons { For Tentage and Equipment. G. S. Wagon	4†
Wagons { For Hospital Equipment for 200 sick ... ... ,,	4
Wagons { Pharmacy	2
	10
Carts, water	2
Total Carriages	12

Remarks.
* Divisible into two half field hospitals.
No Officers or N.-C. Officers of Transport Company, or spare Horses or Transport Equipment are included in the Establishment, but a due proportion would accompany the Transport.
† May be locally supplied.
All artificers' work done by Head-Quarters of the Section supplying the Transport, and the supply cart will be furnished by such Section.
§ If tents are carried for Officers and Men, no extra transport will be required, but each hospital will require 10 circular single tents in addition.
** Officers entitled to public service horses are supplied with N.-C.O.'s saddlery.

Transport required by a Field Hospital, &c.

No. 5.—Transport required by a Field Hospital in the Field for Equipment, &c.

Articles to be conveyed.	Number.	Total Weight.	Carriages. G. S. Wagons, 4-horsed.	Water Carts 2-horsed.	G. S. Wagons, for Hospital purposes, 4 horsed.	Pharmacy, 4-horsed.	Total.	Horses.	Drivers.	Remarks.
		lbs.								
Axes, hand	10	20								For pattern of carriages and tent, *see* Detail No. 4.
Blankets	75	300								
Buckets (canvas)	6	3								
Kettles	9	77								
Officers' Baggage...	8	490								
,, Cooking pots	...	60	4	...	...	...	4	1	8	May, if necessary, be Local Auxiliary Transport.
TENTS.										
Operating Tents	2	200								
Hospital Tents*	50	5,000								
,, Equipment for 200 Sick†	...	...	...	2	4	2	8	28	14	* Including waterproof ground sheets.
Total		6,150	4	2	4	2	12	44	22	† For details, *vide* Medical Regulations.

Each Field Hospital *at the base of operations* will require 11 Marquees, or 50 circular tents of this pattern,* if tents are used for patients, but in other respects the same equipment as above. No Transport will be provided as a part of the Establishment. The two Field Hospitals with a Division will be supplied by the 2nd Line of Divisional Departmental Transport. Three of the six with Army-Corps Reserves will have two sections of a Transport Company.

If tents for Officers and Men are carried, no extra transport will be required.

APPENDIX No. 7.

No. 6.—Detail of the Administrative Medical Staff for a Division and Army Corps.

	Appointment and duties.	Rank.	Medical Officers.	Hospital Corps.					Horses, Riding.
				Officers of Orderlies.	Serjeants (clerks).	Corporals (clerks).	Privates (clerks).	Bâtmen attached.	
Division (or Corps Details).	Head-Quarter Staff..	Deputy Surgeon-General.	*1*	..	*1*	..	..	*2*	*2*
	In charge of Divisional Staff and to act as Sanitary Officer ..	Surgeon-Major.	1	..	..	1	..	1	1
	To act as Quarter-Master under the P. M. O.	Officer of Orderlies.	..	1	..	1	..	1	1
	Total one Division ..	..	2	1	1	2	..	4	4
	Total three Divisions, and Corps Details	..	8	4	4	8	..	16	16
Army Corps Head-Quarters.	Head-Quarter Staff..	Surgeon-General.	*1*	..	*1*	..	*1*	*2*	*3*
	Field Inspector ..	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Sanitary Officer	Do.	1	..	..	..	..	2	2
	Secretary to Surg.-General	Surgeon-Major.	1	..	..	..	..	1	1
	Medical Officer in charge of Head-Quarter Staff	Do.	1	..	..	..	..	1	1
	To act as Quarter-Master under the Surgeon-General	Captain of Orderlies.	..	1	..	1	..	1	1
	Total Head-Quarters ..	..	5	1	1	1	1	9	10
	Grand Total, including three Divisions and Army-Corps Details	..	13	5	5	9	*1*	25	26

N.B.—Figures in *italics* denote those that are included in the General Staff in the Tables of a Division or Army Corps.

All Officers of the Department below the relative rank of Major are supplied with Public Service Horses.

APPENDIX No. 8.

Details of the Administrative Medical Staff for Stationary Field Hospitals along the Line of Communications and at the Base of Operations.

	Appointments and Duties.	Rank.	Medical Officers.	Army Hospital Corps. Officers of Orderlies.	Serjeants.	Corporals.	Privates.	Bâtmen attached.	Riding Horses.
At Head-Quarters.	On Staff of the General Officer commanding line of communication	Surgeon-General.	1	..	..	..	..	2	3
	Secretary to Surgeon-General	Surgeon-Major.	1	..	..	..	..	1	1
	Orderly Officers to ditto ..	Surgeons.	2	..	..	..	..	2	2
	Officer of Army Hospital Corps	Lieutenant of Orderlies.	..	1	..	..	..	1	1
	Clerks to Surgeon-General	Serjeants.	..	..	1	..	..	..	..
		Privates.	..	..	..	..	2	..	..
		Total ..	4	1	1	..	2	6	7
Advance Magazine.	Officer in charge of Stores, advance magazine	Surgeon-Major.	1	..	..	..	..	1	1
	Officer of Army Hospital Corps	Lieutenant of Orderlies.	..	1	..	..	..	1	1
	Compounders, Army Hospital Corps ..	Serjeant.	..	..	2	..	..	..	..
	Packers	Privates.	..	..	..	..	2	..	..
		Total ..	1	1	2	..	2	2	2
On the Lines of communications.	Field Director with each road Commandant	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Orderly Officer . ..	Surgeon.	1	..	..	..	..	1	1
	Clerk	Serjeant.	..	..	1	..	..	..	..
		Total ..	2	..	1	..	..	3	3

Details of the Administrative Medical Staff, &c.

DETAILS OF THE ADMINISTRATIVE MEDICAL STAFF, &c.—continued.

	Appointment and Duties.	Rank.	Medical Officers.	Army Hospital Corps. Officers of Orderlies.	Serjeants.	Corporals.	Privates.	Bâtmen attached.	Horses, Riding.
At the base of operations.	Principal Medical Officer and Sanitary Officer	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Director of Hospitals	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Director of Medical and Surgical stores and supplies	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Secretary to the Senior Medical Officer ..	Surgeon.	1	..	..	..	..	1	1
	Orderly Officer to ditto ..	Surgeon.	1	..	..	..	..	1	1
	Clerks to ditto ..	Serjeant.	..	..	1	..	..	..	..
		Corporal.	..	..	..	1	..	..	..
	Clerks to the Director of Hospitals	Corporal.	..	..	..	1	..	..	..
		Private.	..	..	..	..	1	..	..
	Officers Army Hospital Corps in charge of Hospital equipment in expense and Provision stores	Lieutenant of Orderlies.	..	1	..	..	..	1	..
	Charge of Medical stores	Lieutenant of Orderlies.	..	1	..	..	..	1	..
	Clerks to Director of Stores	Serjeant.	..	..	1	..	..	..	..
		Private.	..	..	..	..	1	..	..
	Compounders under Director of stores ..	Serjeants.	..	..	2	..	..	..	..
	Packers under ditto.. ..	Privates.	..	..	..	..	2	..	..
	Clerks Army Hospital Corps to Officers of Orderlies	Corporals.	..	..	..	2	..	..	..
	Paymaster and Quarter-Master under Surgeon-General	Captain of Orderlies.	..	1	..	..	..	1	1
	Clerks to ditto ..	Non-commissioned Officer.	..	..	..	1	..	..	..
	Acting Serjeant-Major and Quarter-Master Serjeant	Acting Serjeant Major.	..	..	1	..	..	..	..
		Total ..	5	3	5	5	4	11	9

NOTE.—All Officers of the Department below the rank of Surgeon-Major will be supplied with Public Service horses.

Details of the Administrative Medical Staff, &c.

DETAILS OF THE ADMINISTRATIVE MEDICAL STAFF, &c.—continued.

	Appointment and Duties.	Rank.	Medical Officers.	Army Hospital Corps. Officers of Orderlies.	Serjeants.	Corporals.	Privates.	Bâtmen attached.	Horses, Riding.
At the base of operations.	Principal Medical Officer and Sanitary Officer	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Director of Hospitals	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Director of Medical and Surgical stores and supplies	Deputy Surgeon-General.	1	..	..	..	..	2	2
	Secretary to the Senior Medical Officer ..	Surgeon.	1	..	..	..	..	1	1
	Orderly Officer to ditto ..	Surgeon.	1	..	..	..	..	1	1
	Clerks to ditto ..	Serjeant.	..	..	1	..	..	..	..
		Corporal.	..	..	..	1	..	..	..
	Clerks to the Director of Hospitals	Corporal.	..	..	..	1	..	..	..
		Private.	..	..	..	..	1	..	..
	Officers Army Hospital Corps in charge of Hospital equipment in expense and Provision stores	Lieutenant of Orderlies.	..	1	..	..	..	1	..
	Charge of Medical stores	Lieutenant of Orderlies.	..	1	..	..	..	1	..
	Clerks to Director of Stores	Serjeant.	..	..	1	..	..	..	..
		Private.	..	..	..	..	1	..	..
	Compounders under Director of stores ..	Serjeants.	..	..	2	..	..	..	..
	Packers under ditto.. ..	Privates.	..	..	..	..	2	..	..
	Clerks Army Hospital Corps to Officers of Orderlies	Corporals.	..	..	..	2	..	..	..
	Paymaster and Quarter-Master under Surgeon-General	Captain of Orderlies.	..	1	..	..	..	1	1
	Clerks to ditto ..	Non-commissioned Officer.	..	..	..	1	..	..	..
	Acting Serjeant-Major and Quarter-Master Serjeant	Acting Serjeant Major.	..	..	1	..	..	..	..
		Total ..	5	3	5	5	4	11	9

NOTE.—All Officers of the Department below the rank of Surgeon-Major will be supplied with Public Service horses.

APPENDIX No. 9.

Detail of the Staff of the Surgeon-General-in-Chief of an Army-Corps on Active Service.

Appointment and Duties.	Rank.	Medical Officers.	Army Hospital Corps.			
			Officers.	Non-commissioned Officers.	Batmen.	Horses.
Surgeon-General-in-Chief	Surgeon-General.	1	..	..	3	3
Secretary	Surgeon-Major.	1	..	..	1	1
Orderly Medical Officers ..	Do.	2	..	..	2	2
Officer of Army Hospital Corps	..	..	1	..	1	1
Clerks	Colour-Serjeant.	..	..	1	..	..
	Serjeant.	..	..	1	..	..
Total	..	4	1	2	7	7

Medical Department with an Army Corps.

[NOTE.—Figures in Black Type denote the Details that may be locally supplied; those in *italics* are included with the General Staff in the Army-Corps Tables, except those marked §.]

Detail.	Officers. Medical.	Officers. Of Orderlies.	Officers. Transport.	N.-C. Officers and Men. Medical. A. H. Corps Cadre.	Medical. From Reserves. Batman.	Medical. From Reserves. Bearers.	Transport. A. S. Corps including Reserves.	Transport. From Local sources.	Total Officers and Men.
A Division.									
Administrative Staff	*1* / 1	1	...	3	*2* / 2	...	...	...	*3* / 7
1st Line ... Bearer Company	8	3	...	36	11	95	...	...	206
1st Line ... Transport attached	...	...	1	...	...	...	29	23	
2nd Line... 2 Field Hospitals	14	2	...	74	16	...	..	...	150
2nd Line... Transport attached†	...	...		...	...	...	28	16	
Total, one Division ...	*1* / 23	6	1	113	*2* / 29	95	57	39	366
Total, three Divisions...	*3* / 69	18	3	339	*6* / 87	285	171	117	1,098
Administrative Staff of Army-Corps	*1* / 4	1	...	*2* / 1	*2* / 7	...	...	...	*5* / 13
Cavalry Brigade.									
¼ Bearer Company	4	1	...	18	5	47	...	...	98
Transport attached*	...	...	...	...	...	...	12	11	
Corps Details.									
Administrative Staff	2	1	...	3	4	...	...	...	10
1st Line ... ¼ Bearer Company	4	2	...	18	6	48	...	...	104
1st Line ... Transport attached*	...	...	1	...	...	...	13	12	
2nd Line... 6 Field Hospitals	42	6	...	222	48	...	...	...	318
2nd Line... Transport attached. Head-Quarters and 2 Sections of Transport Company, sufficient for 3 Hospitals only.	...	...	3	...	...	...	72	24	100
Total with an Army Corps in the Field	*4* / 125	29	7	*2* / 601	*8* / 157	380	269	164	1,746
Administrative Staff	11	5	...	22	22	...	...	...	81
13 Field Hospitals at base of operations, or along line of communication ...	91	13	...	481	104	...	...	...	689
TOTAL	231	47	7	1,106	291	380	269	164	2,516

Detail.	Carriages. G. S. Wagon, 4-horsed.	Forage, 4-horsed.	Wagon for Equipment, 2-horsed.	Water Carts, 2-horsed.	Supply Cart, 2-horsed.	G. S. Wagon, for Hospl. purposes, 4-horsed.	Auxiliary G. S. Wagon, 4-horsed.	Ambulance Wagon, 2-horsed.	Auxiliary Ambulance Wagon, 2-horsed.	Surgery Wagon, 2-horsed.	Pharmacy Wagon, 4 horsed.	Total.	Horses. Riding.	Draught.	Spare.	Total Draught.	Grand Total Horses.	Remarks.
A Division.																		
Administrative Staff	...	...	...	...	...	...	...	...	...	...	...	...	*2* / 2	...	...	...	*2* / 2	
1st Line ... Bearer Company	...	...	2	2	1	...	...	10	23	2	...	40	11	...	...	...	101	† Transport Staff, &c., shown in Commissariat Table.
1st Line ... Transport attached													4	80	6	86		
2nd Line... 2 Field Hospitals	...	...	...	4	...	8	8	...	...	...	4	24	16	...	...	...	104	
2nd Line... Transport attached†													...	88	...	88		
Total, one Division ...	...	...	2	6	1	8	8	10	23	2	4	64	*2* / 33	168	6	174	209	
Total, three Divisions...	...	...	6	18	3	24	24	30	69	6	12	192	*6* / 99	504	18	522	627	
Administrative Staff of Army-Corps	...	...	...	...	...	...	...	...	...	...	...	...	*3* / 7	...	...	...	*3* / 7	* No Artificers shown; they are included in the Transport Sections with Commissariat.
Cavalry Brigade.																		
¼ Bearer Company	...	...	1	1	...	...	...	5	11	1	...	19	5	...	...	...	47	
Transport attached*													2	38	2	40		
Corps Details.																		
Administrative Staff	...	...	...	...	...	...	...	...	...	...	...	...	4	...	...	...	4	
1st Line ... ¼ Bearer Company	...	...	1	1	1	...	...	5	12	1	...	21	6	...	...	...	54	
1st Line ... Transport attached*													2	42	4	46		
2nd Line... 6 Field Hospitals	...	...	...	12	...	24	24	...	...	...	12	72	48	...	...	...	198	§ Included in the carriages of the Field Hospital.
2nd Line... Transport attached. Head-Quarters and 2 Sections of Transport Company, sufficient for 3 Hospitals only.	...	*1*	*1*	...	...	...	...	...	...	...	...	2§	10	132	8	140		
Total with an Army Corps in the Field	...	...	8	32	4	48	48	40	92	8	24	304	*9* / 183	716	32	748	940	NOTE.—All Officers of the Department below the relative rank of Major are supplied with Public Service Horses.
Administrative Staff	...	...	...	...	...	...	...	...	...	...	...	...	21	...	...	...	21	
13 Field Hospitals at base of operations, or along line of communication ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	
TOTAL	...	...	8	32	4	48	48	40	92	8	24	304	213	716	32	748	961	

If Tents, &c., for Officers and Men are carried, the following will be added:—

	Officers. Medical.	Officers. Of Orderlies.	Officers. Transport.	N.-C. Officers and Men. A. H. Corps Cadre.	Medical. From Reserves. Batman.	Medical. From Reserves. Bearers.	Transport. A. S. Corps including Reserves.	Transport. From Local sources.	Total Officers and Men.	Carriages. G. S. Wagon, 4-horsed.	Forage, 4-horsed.	Wagon for Equipment, 2-horsed.	Water Carts, 2-horsed.	Supply Cart, 2-horsed.	G. S. Wagon, for Hospl. purposes, 4-horsed.	Auxiliary G. S. Wagon, 4-horsed.	Ambulance Wagon, 2-horsed.	Auxiliary Ambulance Wagon, 2-horsed.	Surgery Wagon, 2-horsed.	Pharmacy Wagon, 4 horsed.	Total.	Horses. Riding.	Draught.	Spare.	Total Draught.	Grand Total Horses.	Remarks.
Staff	...	...	...	...	...	...	1	...	1	...	...	1	...	...	...	...	...	...	...	...	1	...	2	...	2	2	Field Hospitals require no extra carriage.
4 Bearer Companies	...	...	...	...	...	...	16	...	16	8	...	...	...	...	...	...	...	...	...	...	8	...	32	...	32	32	
	...	...	...	...	...	...	17	...	17	8	...	1	...	...	...	...	...	...	...	...	9	...	34	...	34	34	

APPENDIX No. 10.

The following Table shows the Cadre of Medical Officers distributed to each Arm of an Army Corps in the Field:—

Arm.	Medical Officer.	Number.	Horses.	Bâmen.
Infantry Battalion	Surgeon ..	1	1	1
Cavalry Regiment	„	1	2	2
Artillery, Horses	„	1	2	2
Field Battery	„	1	1	1
Engineer Company	„	1	1	1
Pontoon Train Troop	„	1	1	1
Telegraph Troop	„	1	1	1

TOTAL FOR ARMY CORPS.

21 Infantry Battalion	Surgeon ..	21	21	21
6 Regiments, Cavalry	„	6	12	12
4 Batteries, Royal Horse Artillery ..	„	4	8	8
11 Field Batteries, R.A...	„	11	11	11
ROYAL ENGINEER.				
3 Divisional and Reserve	„	3	6	6
2 Half Companies Reserve	„	2	4	4
Pontoon Train, 1 Troop..	„	1	2	2
½ Telegraph Troop	„	1	2	2
Total..	„	49	66	66

Hospital Field Equipment.

APPENDIX No. 11.

FIELD HOSPITAL EQUIPMENT.

(Supplied by Ordnance Store Department.)

Field Hospital Store Wagons, &c.

Articles.	For one Hospital.	For 25 Hospitals.	Remarks.
SECTION II.			
CAMP EQUIPMENT AND TOOLS, INTRENCHING.			
Axes, hand	10	250	
Axes, felling, 4½ lbs., straight helved ..	8	200	
Axes, pick, helved, 6½ lbs.	8	200	
Bags, canvas, for flags..	4	100	
Basins, iron, enamelled { 7½-inch	20	500	
Basins, iron, enamelled { 6 "	160	4,000	
Boxes for medals or money	2	50	
Buckets, canvas	6	150	
Can, tin, oil, with screw top	4	48	For 12 hospitals, or 48 wagons.
Canisters, tin { pepper or mustard ..	8	96	For 12 hospitals, or 48 wagons.
Canisters, tin { tea	4	48	For 12 hospitals, or 48 wagons.
Cases, tin { arrowroot or rice	8	96	For 12 hospitals, or 48 wagons.
Cases, tin { sugar	4	48	For 12 hospitals, or 48 wagons.
Cases, tin { salt, lined with wood	4	48	For 12 hospitals, or 48 wagons.
Cups, HP, canteen { tin, drinking, 1-pint ..	136	3,400	
Cups, HP, canteen { zinc, spitting	24	600	
Filters, iron, galvanized, Crease's	4	100	
Flags, field hospital, white with red cross { square, 4 feet ..	4	100	
Flags, field hospital, white with red cross { triangular, directing	8	200	
Harness and Saddlery { Saddlery, &c.	5	60	12 Field Hpls.
Harness and Saddlery { Thread, whited-brown ..	4	..	100 "
Hooks, bill, handled	4	100	
Kettles, Flanders	9	225	
Kettles, tin, cooking, nest of eight	8	200	
Lamps, hand, small, FH	8	200	
Lanterns, coloured, red, marquee, HP. ..	4	100	
Measures, pewter ½-gill to 1 quart, nests ..	4	100	
Mills, coffee, small, F.H.	4	100	
Pans, frying, round, 12-in., with shifting handle	8	200	
Pans, bed, HP, zinc, ...	16	400	
Plates, tin, dinner	200	5,000	
Poles, wood, field, HP { 16 feet for square flag ..	4	100	
Poles, wood, field, HP { 7 feet triangular flag	8	200	
Saddlery, universal, sets, complete	5	60	12 Field Hospitals.
Sheets, ground, waterproof	100	2,500	
Spades, common, helved	8	200	
Stretchers, ambulance wagon, N.P. with slings	8	200	
Stools { camp, folding	8	200	
Stools { close, iron, HP, canteen, complete	12	300	
Tables, camp, folding	4	100	
Tents, circular (double circular without lining)	50	1,250	or 600 for 12 Field Hospitals and 143 marquees for 13 Base Hospitals.

Hospital Field Equipment.

Articles.	For one Hospital.	For 25 Hospitals.	Remarks.
Tents, (double circular without lining) for operating	2	24	12 Field Hospitals.
Thread, whited-brown.. .. .. lb.	4	100	
Tins { lamp cotton	4	48	For 12 hospitals, or 48 wagons.
Tins { soup	4	48	
SECTION III.			
TOOLS, ARTIFICERS'.			
Brushes, whitewash, 6 oz.	8	200	
Chisels, ripping	4	100	
Hammers, handled, claw, 20 ozs., small ..	4	100	
Needles, collar or packing (sizes 1 to 6) ..	24	600	
" sewing, assorted, women's	200	5,000	
Saws, { hand, 26-inch, with case	4	100	
Saws, { tenon, iron back, 14-inch	4	100	
Saws, { cross cut, 5 ft. with case and handles	4	100	
SECTION IV.			
MISCELLANEOUS.			
Thread, packing, middling, 1-lb. balls ..	24	600	
Rags, linen .. .. lbs.	60		
SECTION V.			
ORDNANCE.			
Carts, water	2	50	
Wagons for hospital equipment, G.S. with special fittings	4	48	
" pharmacy	2	24	
" general service for baggage ..	20	40	If Transport is not locally supplied.
SECTION VI.			
BARRACK AND HOSPITAL STORES.			
Basins, zinc, 11-inch, M.P.	20	500	
Blankets, grey, general service	200	5,000	*
Brushes { hand, scrubbing	8	200	
Brushes { shaving, HP	8	200	
Brushes { washing, laundry..	24	600	
Brushes { whitewash, 6 ozs.	8	200	
Buckets, iron, galvanized, 4-gallon, butchers'	8	200	
Cans, tin { oil, feeding, 1 pint	4	100	
Cans, tin { soup or water, 3 gallons	8	200	
Cases { bolster, hair or straw ,Bk.	200	5,000	
Cases { paillasse, Bk...	200	5,000	
Castors, pepper, pewter	4	100	
Choppers, meat, butchers'	4	100	
Cocks, bib, driving, for beer, ¾-inch	8	200	
Combs { horn, hair, 8-inch	20	500	
Combs { ivory, small tooth, 3½ inch	8	200	
Corkscrews, iron folding, HP..	8	200	
Cups, egg, pewter, HP,and Recreation Rooms	40	1,000	

* Forty-five blankets, grey, General Service, will be drawn for the Army Hospital Corps establishment of a Field Hospital, independently of the above.

Hospital Field Equipment.

Articles.	For one Hospital.	For 25 Hospitals.	Remarks.
Feeders, earthen, HP	12	300	
Funnels, tin, ½-pint	12	300	
Forks { carving, buck-handled	4	100	
Forks { dinner, black-handled, large ..	200	5,000	
Forks { flesh, small	4	100	
Knives { butchers' cutting, 10-inch	12	300	
Knives { carving, buck-handled	4	100	
Knives { dinner, black-handled, large ..	200	5,000	
Knives { opening meat tins	8	200	
Ladles, iron, tinned, soup	4	100	
Lines, clothes, HP, 80 yards	8	200	
Machines, weighing, without weights, 14 lbs., enamelled, with pan	4	100	
Pots, zinc, chamber, F.S. and M.P.	24	600	
Saltcellars, wood	12	300	
Scales, weighing, without weights, pillar, for groceries, 7 lbs.	4	100	
Scissors, hair-cutting, 7-inch .. .. pairs	8	200	
Scoops, ½-pint	8	200	
Shapes or dishes, pudding, 1-pint	24	600	
Sheets, barrack, linen	480	12,000	
Skewers, with chains .. .. sets of 3	12	300	
Sponges, bath, 2 oz.	8	200	
Spoons, table, German silver	200	5,000	
Steels, butchers'	4	100	
Towels, hand, HP	220	5,500	
Urinals, pewter	16	400	
Warmers, pewter, stomach	8	200	
Weights { brass, flat { 2 oz.	8	200	
Weights { brass, flat { 1 "	8	200	
Weights { brass, flat { ½ "	8	200	
Weights { brass, flat { ¼ "	8	200	
Weights { iron, ring { 14 lb.	4	100	
Weights { iron, ring { 7 "	8	200	
Weights { iron, ring { 4 "	8	200	
Weights { iron, ring { 2 "	8	200	
Weights { iron, ring { 1 "	8	200	
Weights { iron, ring { ½ "	8	200	
Weights { iron, ring { ¼ "	8	200	

If Tents for Officers and men are required they should be carried in the wagons of the Field Hospital. The numbers required are 10 for each hospital.

NOTE.—Field Hospitals at the base of operations may receive 11 marquees complete in lieu of 50 Circular double Tents without lining.

Clothing supplied by Commissariat Department for Field Hospital Store Wagons.

Articles.	For one Hospital.	For 12 Hospitals.	
Gowns, blue serge, lined	20	240	
Shirts { white cotton	48	576	
Shirts { flannel	48	576	
Socks, grey union, pairs	100	1,200	
Slippers, brown leather	48	576	
Trowsers, blue serge, lined	40	480	
Waistcoats, blue serge, lined	40	480	
Razors	2	24	
Razor strops	1	12	
Worsted	1	12	

Hospital Field Equipment.

For Pharmacy Wagons.

Articles.	For one Field Hospital.	For twelve Field Hospitals.	Remarks.
SECTION II.			
CAMP EQUIPMENT, &c.			
Lamps { hand, small F.H.	4	48	
Lamps { HP, operating	2	24	
Pins, tents, small	20	240	
Tables, operating, F.H. equipment	2	24	
Thread, sewing, whited-brown .. ozs.	8	96	
Kettles, tin, tea, 2-gallon	2	24	
Saucepans, cooking, nest of 4..	2	24	
SECTION III.			
TOOLS, ARTIFICERS', &c.			
SECTION IV.			
MISCELLANEOUS.			
SECTION V.			
ORDNANCE.			
Cans, tin, with screw tops { 6 lbs., oil ..	10	120	
Cans, tin, with screw tops { 10 lbs., paraffin..	2	24	
Cases, tin { with lids opening at top { medical comforts { long ..	4	48	
Cases, tin { with lids opening at top { medical comforts { medium	4	48	
Cases, tin { with lids opening at top { medical comforts { small ..	4	48	
Cases, tin { with lids opening at top { medical comforts { salt, lined with wood	2	24	
Cases, tin { with lids opening at top { medicines { 15 lb. ..	6	72	
Cases, tin { with lids opening at top { medicines { 7 „ ..	12	144	
Cases, tin { with lids opening at top { medicines { 2 „ ..	18	216	
Cases, tin { with lids opening at top { medicines { 1 „ ..	4	48	
Cases, tin { with lids opening at top { medicines { 8 oz. ..	6	72	
Cases, tin { with lids opening at top { medicines { pills or powdrs.	16	192	
Cases, tin { with lids opening at top { medicines { matches	2	24	
Cases, tin { with sliding covers, 8 lb.	10	120	
SECTION VI.			
BARRACK AND HOSPITAL STORES.			
Basins, zinc, 11-inch	4	48	

Hospital Field Equipment.

For Surgery Wagons, &c. of Bearer Companies.

Articles.	For one Company.	For four Companies.	Remarks.
SECTION II.			
Axes, hand	28	112	
Basins, zinc, 9-inch, hospital canteen ..	8	32	
Boxes, wood, medical comfort, divisional — No. 1	2	8	
Boxes, wood, medical comfort, divisional — No. 2	2	8	
Buckets, canvas	17	68	
Canteens, wood H.P. — A.	2	8	
Canteens, wood H.P. — B.	2	8	
Canteens, wood H.P. — C.	2	8	
Flags, F.H., white with red cross — square, 4 ft.	4	16	
Flags, F.H., white with red cross — triangular, directing ..	4	16	
Flannel, white, 27-inch .. .. yards	12	48	
Kettles, Flanders	25	100	
Lamps — hand, small, F.H.	8	32	
Lamps — hospital, operating	6	24	
Lanterns, coloured, red, marquee, H.P. ..	4	16	
Poles, wood, F.H. — 16 feet, for square flags ..	2	8	
Poles, wood, F.H. — 7 feet, for triangular flags ..	4	16	
Pots, zinc, chamber	8	32	
Picketing implements — posts	42	168	
Picketing implements — maul	3	12	
Ropes, picket, tarred, 25 yards	7	20	
Stools, close, iron, H.P., complete	4	16	
Saddlery, universal sets	11	44	
Straps to secure blankets	16	64	
Tables, operating, bearer column	2	8	
Tents, operating, double circular, without inner lining	2	8	
Wagons, ambulance — N.P. 1st line.. ..	10	40	If not locally supplied.
Wagons, ambulance — O.P. 2nd „	23	92	If not locally supplied.
SECTION III.			
TOOLS, ARTIFICERS'.			
Chisels, ripping	8	32	
Hammers, claw, small, 20-oz...	4	16	
Needles — packing	4	16	
Needles — darning, No. 15	50	200	
Needles — sewing „ 7	50	200	
SECTION IV.			
MISCELLANEOUS.			
Bottles, tin, oil, square, with screw top, 2-gallon	2	8	
Scissors, lamp, with guard	2	8	
SECTION V.			
ORDNANCE.			
Carts — supply	1	4	Transport, tip, Mark I.
Carts — water..	2	8	Transport, tip, Mark I.
Wagons — ambulance..	2	8	G.S. light spring.
Wagons — equipment Surgery	2	8	G.S. light spring.

Hospital Field Equipment.

FOR SURGERY WAGONS, &c. OF BEARER COMPANIES—continued.

Articles.	For one Company.	Four four Companies.	Remarks.
SECTION VI.			
BARRACK AND HOSPITAL STORES.			
Blankets, G.S.	142	568	
Castors, pepper, pewter	2	8	
Corkscrews, iron, folding	2	8	
Cups, tin, drinking { 1 pint	50	200	
Cups, tin, drinking { ½ „	50	200	
Knives, opening meat tins	2	8	
Ladles, iron, tinned, for soup..	4	16	
Lanterns, bull's-eye, police	16	64	
Measures, pewter { quart	2	8	
Measures, pewter { pint	2	8	
Measures, pewter { ½ pint	2	8	
Measures, pewter { ¼ pint	2	8	
Pans, zinc, bed..	4	16	
Pots { pewter, mustard	2	8	
Pots { tin, tea, 5-pint	4	16	
Saltcellars, wood	2	8	
Saucepans, nests of 8 (12 qts. to 1 pt.) nests	2	8	
Spoons, German silver, table	100	400	
Stretchers, ambulance, N.P. { 1st line	60	240	
Stretchers, ambulance, N.P. { 2nd „	92	368	
Towels, hand, HP	48	192	
Triangles, with tubular joints, and chain with hook attached	4	16	
Urinals, pewter	4	16	

If tents for officers and men be carried the following are the numbers, and should be carried by Transport service :—

Section.	Articles.	For one Company.	For four Companies.	Remarks.
II	Blankets, horse, with pads and surcingles	101	404	
II	Tents, circular	23	92	
V	Wagons, G.S.	2	8	

Bearer Company—Mountain Equipment.

Section.	Articles.	For one Company.	For four Companies.	Remarks.
VI	Blankets, grey	142		
II	Cacolets, pairs	50		
II	Kettles, Flanders	25		
II	Litters, pairs	26		
II	Saddles, universal Pack	100		
II	Saddles, riding	11		
II	Tents, operating (double circular without lining)	2		
II	Water barrels, pairs	4		

APPENDIX No. 12.

DIET TABLE.

W.O. Form 147.

Military Hospitals.—Articles composing the different Diets for a day.—Avoirdupois Weight.

Tea.	Milk.	Low.	Chicken.	Half.	Roast.	Entire.	Varied.
Bread ... 12 oz. Tea ... ½ ,, Sugar ... 2½ ,, Milk ... 6 ,,	Bread ... 12 oz. Rice ... 2 ,, Milk ... 3 pints Sugar ... 1 oz.	Beef ... 8 oz.* Bread ... 14 ,, Salt ... ½ ,, Tea ... ½ ,, Sugar ... 1½ ,, Milk ... 6 ,, Butter ... 1 ,, * Without bone.	Fowl ... 8 oz.* Bread ... 16 ,, Potatoes 8 ,, Salt ... ½ ,, Tea ... ½ ,, Sugar ... 1½ ,, Milk ... 6 ,, Butter ... 1 ,, * 10 (if with bone).	Meat { Beef or Mutton. } 8 oz.* Bread ... 16 ,, Potatoes ... 8 ,, Barley ... 1½ ,, Salt ... ½ ,, Tea ... ½ ,, Sugar ... 1½ ,, Milk ... 6 ,, Vegetables 4 ,, Butter ... 1 ,, Flour ... ¼ ,, * 10 (if with bone).	Roast joint, Chop, or Steak. Joint { Beef or Mutton } 10 oz. or Chop ,, Steak without bone ... 8 oz. Bread ... 18 ,, Potatoes ... 8 ,, Salt ... ½ ,, Tea ... ½ ,, Sugar ... 1½ ,, Milk ... 6 ,, Vegetables 4 ,, Butter ... 1 ,,	Meat { Beef or Mutton } 12 oz.* Bread ... 16 ,, Potatoes ... 16 ,, Barley ... 1½ ,, Salt ... ½ ,, Tea ... ½ ,, Sugar ... 1½ ,, Milk ... 6 ,, Vegetables 4 ,, Butter ... 1 ,, Flour ... ¼ ,, * 15 (if with bone).	Meat { Beef or Mutton. } 12 oz.* Bread ... 18 ,, Potatoes ... 16 ,, Salt ... ½ ,, Tea ... ½ ,, Sugar ... 1½ ,, Milk ... 6 ,, Vegetables 4 ,, Butter ... 1 ,, Meat—roasted, baked, or stewed. * 15 (if with bone).
BREAKFAST.							
Tea ... 1 pint Bread ... 4 oz.	Milk ... 1 pint Bread ... 4 oz.	Tea ... 1 pint Bread ... 5 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,
DINNER.							
Tea ... ... 1 pint Bread ... 4 oz.	Rice milk ... 1 pint Bread ... 4 oz. Sugar ... 1 ,,	Beef tea ... 15 oz. Bread ... 4 ,,	Fowl ... 8 oz. Rosted, boiled, stewed or made into chicken tea 12 oz. Bread ... 4 ,, Potatoes ... 8 ,,	Soup... ... 15 oz. Meat... ... 8 ,, Bread ... 4 ,, Potatoes ... 8 ,,	Roast Joint; Chop or Steak roasted or stewed. Meat... ... 8 oz. Bread ... 6 ,, Potatoes ... 8 ,, Vegetables ... 4 ,,	Soup ... 1 pint Meat ... 12 oz. Bread ... 4 ,, Potatoes ... 16 ,,	Meat... ... 12 oz. Bread ... 6 ,, Potatoes ... 16 ,, Vegetables ... 4 ,,
SUPPER.							
Tea... ... 1 pint Bread ... 4 oz.	Milk ... 1 pint Bread ... 4 oz.	Tea... ... 1 pint Bread ... 5 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,	Tea ... 1 pint Bread ... 6 oz. Butter ... ½ ,,

Note.—Drinks for patients are to be made and charged according to the following proportions :—

Barley Water.—Barley, 2 oz.; sugar, 2 oz.; for every five pints.

Rice Water.—Rice, 2 oz.; sugar, 2 oz.; for every five pints.

Lemonade.—Two large lemons; and sugar, 1½ oz., to two pints.

Gruel.—Oatmeal, 2 oz.; and sugar, 1½ oz., to two pints.

2 ozs. of pepper may be issued for every 100 diets except tea and milk diet.

1 oz. of mustard may be issued for every 20 beef diets.

APPENDIX No. 13.

Specification of the new Regulation Case of Pocket Instruments for the use of all Medical Officers under the Rank of Deputy Surgeon General.

No.		Dimensions.	Price.		
		Inches.	£	s.	d.
1	Probe curved and straight sharp pointed Bistouries in 1 handle	$3\frac{7}{8}$	0	8	6
1	Symes' abscess knife and double-edge scalpel, in 1 handle	$3\frac{7}{8}$	0	8	6
1	Tenaculum and gum knife, in 1 handle ..	$3\frac{7}{8}$	0	8	6
1	Pair crooked scissors	$4\frac{3}{4}$	0	3	6
1	Spatula, German silver	$4\frac{3}{4}$	0	1	9
1	Bow dressing forceps	$4\frac{3}{4}$	0	3	6
1	Director and aneurism needle, plated ..	$4\frac{3}{4}$	0	2	0
1	Pair artery forceps, fenestrated	$3\frac{3}{4}$	0	5	0
2	Probes, plated	$4\frac{3}{4}$	0	2	0
1	Male and female silver catheter combined caustic-case with palladium crayon	$4\frac{3}{4}$	0	18	0
1	Clinical Thermometer	4	0	7	0
1	Case for ditto, plated	$4\frac{1}{8}$	0	2	0
2	Lancets	$2\frac{1}{4}$	0	3	0
2	Dieffenbach's forceps	2	0	5	0
1	Silver hypodemeric syringe, in case ..	3	0	14	0
6	Needles, plated	$2\frac{1}{2} \times 2\frac{1}{8}$	0	2	0
1	Tablet of silk and wire for sutures		0	1	3
	All contained in a Morocco single-flapped case of the following dimensions	Length $5\frac{1}{4}$, Breadth $2\frac{5}{8}$, Thickness at clasp $1\frac{1}{4}$	0	9	6
	Total weight with instruments $9\frac{1}{4}$ ozs. ..	£	5	5	0

APPENDIX No. 14.

INSTRUCTIONS TO COMMANDING, MEDICAL, AND OTHER OFFICERS OF THE ARMY, FOR THEIR GUIDANCE AT A TIME WHEN THERE IS REASON TO ANTICIPATE AN OUTBREAK OF CHOLERA, OR WHEN IT IS ACTUALLY PREVALENT AMONG THE TROOPS.

Officers whose duty it is to see to the health and comfort of the troops are especially required to exercise the utmost vigilance at a time when Cholera is prevalent, or when there is reason to believe an outbreak may be expected.

I. – Measures to be adopted in anticipation of a threatened invasion of Epidemic Cholera in Military Stations.

1. Medical officers will make themselves acquainted with every arrangement of their corps, and the condition of every locality in and about the barracks, in order that they may be in a position to suggest, for the consideration of their Commanding Officers, not only improvements in ordinary matters, but arrangements of a more temporary character, applicable to an exceptional period.

2. Nuisances will be removed and cleansing enforced *outside* barracks, and with this view local boards or persons entrusted with powers to remove nuisances will be called upon to put their powers in force.

3. As much space as is practicable will be afforded to each individual in barracks; on this account any existing misappropriations will be restored to their proper use.

Should any alteration be made in the appropriation of rooms in barracks or hospitals that has been sanctioned by the Secretary of State for War, the barrack master or Purveyor will report the alteration to the Secretary of State without delay.

4. Careful attention will be paid to the ventilation of all the barrack buildings by enforcing the full use of the means of ventilation, in keeping open all apertures intended specially for ventilating purposes, and by calling the attention of the authorities to any structural defects.

5. The instructions laid down in the Queen's Regulations regarding the cleansing and supervision of barrack rooms will be carefully observed. The floors of the rooms will not be washed in wet weather. The regular airing of bedding and its exposure out of doors in fine weather will be attended to; and if Epidemic Cholera appears in the

Instructions to Commanding, Medical, and other Officers, &c.

INSTRUCTIONS, &c.—continued.

country it will be desirable to cleanse and limewash ceilings and walls of all barracks, hospitals, quarters, and stables. Walls of barracks, &c. that have been recently limewashed will not be limewashed again without the previous sanction of the Secretary of State for War; nor, will walls be limewashed by civil labour without similar authority.

6. All sewers, latrines, urinals, and ashpits will be inspected frequently, and their cleanliness ensured by an efficient system of frequent flushing and cleansing; any accumulation in such places will be scrupulously removed, as it must be borne in mind that during the prevalence of an epidemic it is injudicious to disturb old accumulations. A free use of lime is enjoined.

All drains and sewers connected with barracks or hospitals, not otherwise flushed, will be flushed daily by hose, if there are waterworks, or by pails or tubs of water carried by hand if there is no such source of supply. The volume of water used may vary from five gallons to fifty gallons, according to the cross sectional dimensions, length and gradient of the drain or sewer to be flushed. The water should be poured in suddenly, so as to cause a scour.

Sewers and drains with open outlet ends should have the outlets protected by a flap or valve, to prevent sewer air being blown into the buildings.

7. Every source of water supply will be investigated, and the possibility of contamination, by percolation from sewage or from surface impurities, looked to; an examination will be made of the water, and any such impurity detected in it will at once preclude its use for drinking or cooking purposes.

8. Attention will be directed to the soldiers' rations, and care taken that they never fall below the standard quality; the men will be enjoined to be careful as to what they eat; and the purchase of any articles deemed indigestible or deleterious to health will be discouraged as much as possible.

9. As much variety as possible will be afforded in the cooking of the rations.

10. The canteen will be frequently visited, and its supplies carefully examined.

11. It will be unnecessary for medical officers to recommend any change in the ordinary duties of the men, as long as they are not excessive. They will, however, suggest the advisability of reducing the night duties to the minimum that the necessities of the station will permit, and point out to the Commanding Officer that any duty subjecting the men to wet clothes or wet feet should be avoided when possible. When exposure is unavoidable, the men should be directed to change the wet articles of clothing as speedily as possible.

12. Medical officers will make frequent inquiry as to the existence of diarrhœa amongst the men; and in the event of affections of the bowels being prevalent will enjoin an immediate application to hospital for medicine, not necessarily with the view of the men being detained in hospital.

Instructions to Commanding, Medical, and other Officers, &c.

INSTRUCTIONS, &c.—continued.

II.—Additional measures to be adopted when the Disease has appeared among the inhabitants in the vicinity of a Military Station, or among the Military of the Station.

13. The occurrence of Cholera in places where troops are stationed will be immediately reported to the Director-General by the principal or senior medical officer, without waiting for its appearance being officially announced by the local board of health.

14. A daily report, as accurate as can be obtained, of the progress of Cholera amongst the civil population of places where troops are stationed will also be required from the principal or Senior Medical Officer.

15. The men will be prohibited going into infected districts, and pickets will be placed to prevent them. Under exceptional circumstances it may be advisable to confine the troops to barracks, and prohibit any but the most necessary intercourse with persons outside.

16. Where there is reason to apprehend that the health of families living out of barracks would be endangered, such families may be brought into barracks, if it be possible to do so without overcrowding. If the season permit they will be encamped, or, if there be danger of overcrowding, houses in healthy positions will be hired. Families of men married without leave will not be brought into barracks without special sanction. When the senior Medical Officer thinks it necessary to bring such families into barracks he will apply to the Officer Commanding, who will forward his report, with that of the Barrack-master to the General Officer Commanding, by whom it will be transmitted with the opinion of the Principal Medical Officer and District Barrack-master, and his own recommendation, for the consideration of H. R. H. the Field-Marshal Commanding-in-Chief, and the Secretary of State for War. In case of emergency the General Officer Commanding may order such married people at once into barracks and apply for covering instead of previous authority; but no expense is to fall on the public without previous authority.

17. Good fires will be provided in the barrack rooms to increase ventilation and to diffuse cheerfulness, which last should be promoted in every way.

The intermediate allowance of fuel will be issued during the Summer months, and the Winter allowance during the intermediate months, on the weekly certificate of the Principal Medical Officer and Officer Commanding, that from the prevalence of Cholera among the troops at the station or in its vicinity such increased allowance is necessary.

18. In old and defective barrack or hospital buildings, where there is reason to suspect that injurious emanations proceed from the sewers at a time when cholera has appeared in the vicinity and where sinks, waste-water pipes from tanks, or waterclosets, communicate direct with such sewers or drains, application will be made to the proper authority to have the drain connexion broken externally, so that the drain or sewer may have full means for ventilation into the open air, at a safe distance from and to leeward of the buildings.

19. Disinfectants, such as chloride of lime, preparations of carbolic acid, perchloride of iron, or other approved preparations, will be used twice each day in latrines, urinals, sewers, ash-bins, and other similar

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places, on certificate of necessity by the Principal Medical Officer. A non-commissioned officer with a fatigue party will be instructed in the performance of this duty, which will be rigorously carried out, and either the Quartermaster or Orderly Officer will be responsible for its execution. Disinfectants will be issued from the Barrack department on the spot, on the Principal Medical Officer's certificate.

When time permits, the Barrack-master will apply in the usual manner for previous authority before incurring expense for disinfectants; but in case of emergency, he will obtain such a supply as may be necessary for immediate use, and apply for covering authority, and for such further supplies as may be required.

It is to be observed, however, that if barracks are kept in proper sanitary condition, they are the last places in which special disinfectants are required, and disinfectants must never be used as substitutes for cleanliness in barracks. The lavish purchase of disinfectants on the ground that isolated cases of Cholera have appeared in the Country will not be sanctioned.

The best means of applying the disinfectants are explained at pages 9 and 10.

20. Married men (if out of mess) will each be provided with a ration the same as the single men.

21. The men will be cautioned against intemperance, and every means adopted to repress it; with which view, night passes will be prohibited.

22. Tea or coffee will be issued to the men before going on morning or night duties, on a weekly certificate by the Principal Medical Officer that the issue would be beneficial to health; and every man will have his breakfast, if possible, before leaving his barrack room for parades or other duties.

23. On the occurrence of a case of Cholera among the troops, a report will be forwarded by the Senior Medical Officer to the Director-General, and continued daily until further orders.

24. Questions of importance not admitting of delay may be telegraphed to the Director-General by the Principal Medical Officer.

25. On any appearance of Cholera in a corps, the troops will be camped out when practicable, provided the season of the year will permit of it; good ground being selected beforehand, and arrangements made by the Quartermaster General's department.

26. Health inspections will be made at morning and evening parades, and a daily inspection of every individual attached to the regiment, but the avoidance of all unnecessary alarm cannot be too strongly enjoined.

27. Each soldier will be provided with two cholera belts as part of his necessaries. Flannel shirts ought also to be worn.

28. It is very desirable, during the prevalence of Cholera, to boil all drinking water, and to filter it through charcoal when a filter is available.

29. The minds of the men will as much as possible be occupied and amused. Every game or employment tending to recreation, or to induce healthy exercise, should be promoted, Occasional marches for short distances into the country, without arms, may be advisable.

30. Diarrhœa will be most carefully attended to during the prevalence of Cholera, and non-commissioned officers will be instructed to

INSTRUCTIONS, &c.—continued.

order all men to hospital whom they may detect suffering from looseness of the bowels. Sentries will be placed in the vicinity of latrines, and men found going twice in quick succession to the rear will be sent to hospital immediately. For the better detection of this usually painless affection, tickets will be provided for the men, and every time a man goes to the rear he will hand one of them to the sentry; but a man not having his ticket will be allowed to pass, and his name will be reported to the orderly serjeant. A room for observation in hospital will be provided for such men, and their motions treated as in the case of Cholera patients. Medicine will be kept prepared for issue to such cases, day and night, and, to avoid delay, a supply will be placed in the hands of non-commissioned officers in barracks to be administered to men while preparing to go to hospital.

31. The place whence a patient is taken from barracks will be thoroughly washed, and, if deemed necessary, fumigation will be made by chlorine or nitrous acid gas, in accordance with instructions at page 111. When suspicious cases, or cases of Cholera, are removed to hospital, their barrack bedding will be taken with them for use in hospital; each such case being reported to the Barrack-master in order that the bedding may be properly changed.

32. If it be found that any preponderance of cases of Cholera or diarrhœa occurs in any building or room, the medical officers will carefully examine the locality, with a view to detecting and remedying if practicable any insanitary condition. The building or room will be vacated, and fumigated with chlorine, nitrous, or sulphurous acid gas. (See instruction at pages 111.) The walls, ceilings, and floors will be scraped and cleansed, and the two former limewashed before re-occupation.

The fumigation of rooms on account of Cholera will be specially conducted under a medical officer with the assistance of the barrack department.

33. When cases occur in camp, the ground will, if possible, be changed, as so successfully practised in India, but where this may be impracticable, as will usually be the case at home, the tents should be struck, and the ground cleansed and aired before re-pitching them.

34. If the troops are not camped out, the regimental hospital will be appropriated to the treatment of Cholera, and the ordinary cases of sickness accommodated in barracks, in rooms set apart and equipped for the purpose; or where this cannot be done, in a hired house. An application for carrying out the latter arrangement will be previously submitted to the Director-General. Should the troops be encamped, all the sick will be treated in tents, the tents for Cholera patients being placed in an isolated position.

35. Medical officers will visit their hospitals frequently. They will be required to be always available for any sudden call on their services, and when Cholera prevails in the corps, they will not leave the barracks, except under imperative necessity.

36. Cases among the wives and children of soldiers will be treated in the female hospital, where such institutions exist, provided the regiment is not camped out. In stations where there is no female hospital, application will be made to the proper authorities for a room to be provided for the accommodation of such cases.

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37. The women will be warned that if they or their children are attacked with diarrhœa they must at once go to hospital.

38. The patients' barrack bedding will be used in hospital. The purveyor will provide palliasses and pillows with straw in the event of a change being requisite. All the hair mattresses and pillows will be removed from the hospital, to equip the rooms set apart for the treatment of the ordinary cases of sickness when Cholera attacks the troops.

39. When the barrack bedding is no longer required for use, the straw will be burnt, and the bedding disinfected before being removed from the hospital enclosure, and treated in accordance with paragraph 655, page 110, Medical Regulations (boiling water being used). The foregoing is applicable to hospital sheets, blankets, clothing, and other such articles of hospital equipment as may be used. But such portions of the soldier's kit as cannot be so treated will be exposed to the air and sun, fumigated, and beaten.

40. The stools and vomit will be passed into vessels and deodorized, at once removed, and carefully buried deep at a distance from any source of water supply, or thrown into a latrine set apart for the purpose, which should not for the time being be used for any other purpose. Care will be taken that no other latrine or watercloset is so used.

41. The attendants upon Cholera patients will not be taken from this special work to attend on other cases of disease so long as Cholera may exist in the barracks or hospital. They will be enjoined to wash their hands well whenever they have been in contact with the discharges of the sick.

42. Corpses will be removed to the dead-house without delay, and buried as soon as possible, but never conveyed to the graveyard on men's shoulders.

43. Post-mortem examinations will be performed in such cases and under such modifications as may be necessary.

III.—Disinfectants recommended for use in Barracks.

Quick Lime.

Carbolic Acid.

Chloride of Lime.

Common Commercial Perchloride of Iron.

Quick Lime, fresh burnt, to be used either in powder, or mixed with water in the proportion of about twelve times its bulk.

Carbolic Acid, in the proportion of 1 gallon of acid to 50 gallons of water, or to 100 gallons of water.

Chloride of Lime, mixed with water in the proportion of about a pound to the gallon. Or of the solution ordinarily sold, from a pint and a half to two pints, in a gallon of water.

The common commercial liquid Perchloride of Iron, in dilution, with water, in the proportion of one part to 10.

It is considered that any of the foregoing are well adapted for the

INSTRUCTIONS, &c.—continued.

above purpose; many other disinfectants are also valuable, but the expense of most of them would preclude their use on a large scale.

Solutions of Carbolic Acid or Perchloride of Iron are only to be used for sewers, latrines, and urinals after these have been flushed with water.

It is considered that about 100 gallons of a solution of Carbolic Acid, of the strength given above, would be sufficient for disinfecting purposes in a barrack containing one or two regiments, for a day.

From half to one gallon of the solution of the liquid Perchloride of Iron, of the strength proposed, would be sufficient for a latrine.

APPENDIX No. 15.

SANITARY REPORT.

In the preparation of annual or special Sanitary Reports Medical Officers will be guided by the following outline of subjects:—

The geological formation.

The physical geography and medical topography of the surrounding country.

Its features, mountains, valleys, rivers, lakes, marshes, vegetation, natural history, the diseases, particularly those of the preventable class, prevalent amongst its population.

Also its vegetable and animal products, their nature and amount, and their adaptation for furnishing supplies for troops; the sources, quality, and quantity of the water supply, and whether it is wholesome, and what means of purification are in use, if such be necessary.

At all stations he should describe the buildings in use for barracks or hospitals, guard-rooms, and cells, as regards their position, exposure, elevation above the sea level, or above neighbouring low ground, or lake, or river banks; their distance from sea, lakes, or rivers; the number of men they are capable of containing according to regulation, and the numbers in them; their structure, drainage, means, and sufficiency of ventilation; materials of which they are built; the number, length, breadth, and height of rooms and wards; the numbers and position of windows and doors; the average monthly cubic space each man has had in barracks, guard-rooms, cells, and hospitals; state of cleanliness within and without the buildings; and whether the walls are sufficiently limewashed.

Means of lighting and warming; nature and amount of fuel.

Baths and lavatories, their condition, and if sufficient for cleanliness for troops and sick; whether there are bathing parades, and how often a week.

Kitchen and cooking utensils for barracks and hospitals, whether sufficient for a variety of cooking.

The amount and sufficiency of barrack accommodation for married soldiers, and the state of their quarters.

The sanitary state of latrines and urinals, whether they are flushed or emptied by hand, and at what interval of time, also of water-closets, ashpits, stables, &c.

The nature and composition of rations, whether sufficient and sufficiently varied, and what facilities are afforded by the station for varying them; what fresh or preserved vegetables are used, and their average daily amount; whether the ration includes tea, coffee, or cocoa.

Sanitary Report.

SANITARY REPORT—continued.

The nature and qualities of fruits and vegetables obtainable and in use, and their effects on health.

Whether rations and diets are properly cooked by roasting, boiling, baking, &c.

The quality of bread or of biscuit, and the amount of either in the rations.

The spirits, beer, or other liquors used by the troops, their quality and effect on health;

Similar information as to hospital diets, and a statement of any changes made in them on account of the character or kind of supplies available.

Whether the clothing of the troops is sufficient and adapted for the climate, and if not, to state what improvements might be made.

The nature of the bedding and whether sufficient.

The nature and amount of duty or labour performed by troops, and their influence on health; drills how often, and at what hours they take place; length of marches and at what hours.

The proportion of nights in bed to those on duty.

Gymnastics, amusements, and recreations in use, and if conducive to health.

State of canteens, size and state of ventilation of rooms, and quality of provisions and liquors sold in them; whether the canteens are under proper regulations; whether disease is traceable to articles sold in them.

Amount of intemperance and of crime and disease directly or indirectly traceable to its effects, also the means in use for repressing intemperance.

State of vaccination in the corps and the extent to which it is a preservative against small-pox; whether re-vaccination has been carried out, and the results.

General defects in position of station on low ground near marshes requiring drainage.

Overcrowding in camps, barracks, huts, tents, or hospitals.

Defective drainage and ventilation of camps, barracks, huts, tents, or hospitals.

Marshes or wet ground, watercourses, or works of irrigation to windward.

River banks.

Nuisances, defective cleansing.

Want of cleanliness in barracks, huts, or hospitals, and want of limewashing.

Defective drainage of ground near barracks, hospitals, &c.

Defective sanitary condition of privies, latrines, water-closets, stables, &c.

Monotonous diet, defective diet, salt provisions.

Defective clothing.

Bad water, especially if polluted by putrescent organic matter.

Drunkenness, or use of unwholesome liquors.

Nature and description of duties.

Heavy rains, or unusual heats, calms.

Climatic peculiarities.

Prevalence of epidemics, and at what season. Wherever meteoro-

Sanitary Report.

SANITARY REPORT—continued.

logical observations have been taken, their relation, if any be traced, to prevailing or epidemic disease should be stated.

The medical officer should endeavour to form an estimate of the relative value of each class of causes which have predisposed the troops to these diseases. He should give a minute account of them, together with a statement of what precautionary measures he recommended, either verbally or in writing, to his Commanding Officer, and the result of his recommendation.

If any diseases have become epidemic or prevailed in the district, he should examine carefully into the history of the disease, and its predisposing causes, and report on these as well as the steps he recommended to protect the troops from an invasion of the disease, with the results.

He should state to what extent new arrivals at the station have suffered from disease; also the proportion of acclimatized troops who have been affected, and whether the proportion of attacks and deaths have been greater in young soldiers or in those of more mature age.

If cholera has prevailed he should state the measures adopted by him for discovering and treating the disease in its premonitory stages, and the results.

If any such diseases as fever, erysipelas, or hospital gangrene, have appeared among the sick *after* they have been admitted into hospital, he should report the history of the occurrence, its causes, the measures adopted to arrest these diseases, and the results.

APPENDIX No. 16.

SCALE OF HOSPITAL EQUIPMENT.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																								
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
A	Axe, hand, 2lb. handled	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
BATHS.	Slipper Tin	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3	5	6	7	10	12	14	16	18	20	20
	Open, portable ,, ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	2	3	3	4	5	6	7	8	9	10	10
	Foot ,, ...	1	1	1	1	1	1	1	1	1	2	2	3	4	5	6	10	12	14	20	25	30	30	35	40	40
	Hip ,, ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	2	2	3	3	5	6	7	8	9	10	10
	Arm ,, ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	2	2	3	3	5	6	7	8	9	10	10
	Wooden, medicated	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	4	4
	Shower...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	2	2	2
BASKETS.	Hand, large	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	2	2	3	3	4	4	5
	Hand, small	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
	Bottle, 1 dozen	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	3	3	4	4	5	5	6
	Bottle, ½ dozen	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3	4	4	5	5	6
	Bottle, ward	...	...	...	...	...	...	...	...	1	2	3	4	5	6	7	10	12	14	20	20	25	30	25	40	45
	Dirty Linen, large, with lid and lock ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
BASINS.	Earthenware, large for mixing puddings ...	...	...	...	...	...	...	...	...	1	1	2	2	3	3	4	5	6	8	12	14	16	18	20	20	20
	Earthenware, small, for washing sores ...	1	1	1	2	2	2	2	2	3	5	6	10	12	16	20	25	30	35	50	60	70	80	90	100	110
	Wash-hand earthenware ...	1	1	2	2	2	2	3	3	3	5	6	10	12	16	20	25	30	35	50	70	80	90	100	125	150
	Soup, pint, earthenware, without covers ...	5	6	7	8	10	12	14	16	18	30	38	55	68	80	100	130	160	190	250	310	375	440	500	550	600
	Covers for ditto	1	1	2	2	2	2	3	3	5	6	10	12	15	18	20	25	30	40	50	60	70	85	100	110	120

Scale of Hospital Equipment.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																								
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
BOXES.	Salt, Wainscot	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Coal, 4 bush., Iron	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Pepper, Pewter, ½ lb. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	3	3	3	3	3
	For Brushes, Wooden with Trays...	1	1	1	1	1	1	1	1	1	2	2	4	5	6	8	10	12	15	20	25	30	35	40	45	50
BEDDING.	Bedsteads, Iron, H. P. Regulation, without racks...	4	5	6	8	9	10	11	12	14	26	32	48	60	72	90	120	150	180	250	310	365	420	480	540	600
	Racks, with catches for ditto...	4	5	6	8	9	10	11	12	14	26	32	48	60	72	90	120	150	180	250	310	365	420	480	540	600
	Beadsteads, iron, dropsy, with racks	...	...	...	...	...	...	...	...	1	2	3	4	5	6	8	10	12	15	25	30	35	40	45	50	55
	Mattresses for ditto	...	...	...	...	...	...	...	...	2	3	4	5	7	8	10	12	15	20	30	35	40	45	50	55	60
	Sheets for ditto	...	...	...	...	...	...	...	...	4	8	12	16	20	24	32	40	48	60	100	120	140	160	180	200	220
	Beds, hair	4	5	6	8	9	10	11	12	14	28	32	50	60	72	90	120	150	180	250	310	370	430	500	550	600
	Blankets, H. P.	12	15	20	24	30	34	38	42	45	80	100	160	200	240	300	400	500	600	800	1000	1200	1400	1600	1800	2000
	Bolsters, Hair, H. P. ...	4	5	6	8	9	10	11	12	14	28	32	50	60	72	90	120	150	180	250	310	370	430	500	550	600
	Cases, slip, for H. P. Hair Bolsters	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Cases, slip, for H. P. Pillo ws, large ...	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Cases, slip, for H. P. Pillows, small ...	2	2	4	4	6	6	8	8	10	20	25	40	50	60	70	90	110	140	175	220	270	310	350	400	450
	Cases, slip, for H. P. Hair Beds	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Cords, Bed. 19 yards for Regulation and Dropsy Bedsteads	5	6	7	8	9	11	12	13	16	32	40	60	75	90	110	150	190	225	300	375	450	525	600	675	750
	Cords for bed-pulls	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Handles for bed-pulls ...	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Pillows, Hair, large	4	5	6	8	9	10	11	12	14	28	32	50	60	72	90	120	150	180	250	310	370	430	500	550	600
	Pillows, Hair, small	1	1	2	2	3	3	4	4	5	10	12	20	25	30	35	50	60	75	100	125	150	175	200	225	250
	Sackings, Bed, for Regulation bedsteads ...	5	6	7	8	9	11	12	13	16	32	40	60	75	90	110	150	190	225	300	375	450	525	600	675	750
	,, ,, for Dropsy bedsteads	...	...	...	...	...	...	...	...	1	2	3	4	6	7	8	11	12	16	28	32	38	45	50	58	65
	Sheets, linen	8	10	12	16	18	20	22	25	30	55	65	110	130	165	190	250	310	380	500	625	750	875	1000	1125	1250

Scale of Hospital Equipment.

BRUSHES.	,, cotton	8	10	12	16	18	20	22	25	30	55	65	110	130	165	190	250	310	380	500	625	750	875	1000	1125	1250
	Counterpanes, medical, white tufted ...	2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
	Counterpanes, surgical, check	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1,000
	Bed-covers, waterproof ...	1	1	1	1	1	1	1	1	2	4	5	8	10	12	16	20	25	30	40	50	60	70	80	90	100
	Cases, paillasse, straw ...	3	3	3	3	4	4	4	4	4	8	12	14	15	17	20	25	32	40	50	60	70	85	100	125	150
	Cases, bolster, straw... ...	3	3	3	3	4	4	4	4	4	8	12	14	15	17	20	25	32	40	50	60	70	85	100	125	150
	Black Lead, sets	2	2	2	2	2	2	2	2	2	3	3	5	6	7	9	12	15	18	25	30	35	40	50	55	60
	Flesh	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	6	7	8	9	10	11	12
	Hand, Scrubbing	1	1	1	1	1	1	2	2	2	3	3	5	6	7	9	12	15	18	25	30	35	40	45	50	60
	Hair	2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	140	200	250	300	350	440	450	500
	Heads, Long Sweeping ... ... (each)	2	2	2	2	2	2	2	2	2	4	5	7	8	10	12	15	18	22	30	35	40	50	60	70	80
	Handles for do. ... (each)																									
	Hand, Sweeping or Dust ...	2	2	2	2	2	2	2	2	2	3	3	5	6	7	9	12	15	18	25	30	35	45	50	55	60
	Shaving	1	1	1	1	1	1	1	1	2	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
	Shoe, sets	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	6	7	8	9	10	11	12
	Whitewash, 6 oz.	1	1	1	1	1	1	1	1	1	2	2	2	3	4	5	6	8	9	12	14	16	18	20	22	24
	Clamps, Dry rubbing Blocks, Wood for do. Irons for do. ... ... Handles for do. ... (each)	1	1	1	1	1	1	2	2	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100
BIER.	Bier (Iron Frame only) ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2
	Pall, Black Velvet for ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2
	Or Hand Bearer, with Cross-handles ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2
MISCELLANEOUS.	Bowls, Shaving, Wooden ...	1	1	1	1	1	1	1	1	2	2	2	4	5	6	8	12	14	16	20	25	30	35	40	45	50
	Bellows, Kitchen	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Block, Chopping	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1
	Bearer, Hospital, consisting of Pillows, Hair, Poles, and Leather Strings ...	...	...	...	1		1	1	1	1	1	1	1	2	2	2	3	3	4	6	8	9	10	12	14	15
	Boards for Bedhead Ticket ...	3	4	5	6	7	8	9	10	12	25	30	50	60	70	85	112	140	170	225	275	325	380	450	500	550
	Boards for Diet Scale ...	1	1	1	1	2	2	2	2	2	3	4	5	6	7	8	10	12	15	20	25	30	35	40	45	50
	Boards, Inventory	3	3	3	4	4	4	4	5	5	7	8	10	11	12	13	15	18	22	30	35	40	45	50	5	60
	Boards, Knife...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	4	4	5	5	5	6	6
	Boards, Pastry	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	2	2
	Bottles, Beer, Stone	2	3	4	6	7	8	9	10	12	25	30	50	60	72	90	125	155	190	250	300	350	400	450	500	550
	Boilers, large...	...	...	...	...	...	...	...	...	...	...	1	1	2	2	3	4	5	6	8	10	12	14	16	18	20
	Boilers, small	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Butter Pots (3 ounce) ...	2	3	4	6	7	8	9	10	12	25	30	50	60	72	90	125	150	175	250	300	350	400	450	500	550
	Butter Slabs	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1

Scale of Hospital Equipment.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																									
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
BOXES.	Salt, Wainscot	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Coal, 4 bush., Iron	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	Pepper, Pewter, ½ lb. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	3	3	3	3	3
	For Brushes, Wooden with Trays...	1	1	1	1	1	1	1	1	1	2	2	4	5	6	8	10	12	15	20	25	30	35	40	45	50
BEDDING.	Bedsteads, Iron, H. P. Regulation, without racks...	4	5	6	8	9	10	11	12	14	26	32	48	60	72	90	120	150	180	250	310	365	420	480	540	600
	Racks, with catches for ditto...	4	5	6	8	9	10	11	12	14	26	32	48	60	72	90	120	150	180	250	310	365	420	480	540	600
	Beadsteads, iron, dropsy, with racks	...	...	...	...	...	...	...	...	1	2	3	4	5	6	8	10	12	15	25	30	35	40	45	50	55
	Mattresses for ditto	...	...	...	...	...	...	...	...	2	3	4	5	7	8	10	12	15	20	30	35	40	45	50	55	60
	Sheets for ditto	...	...	...	...	...	...	...	...	4	8	12	16	20	24	32	40	48	60	100	120	140	160	180	200	220
	Beds, hair	4	5	6	8	9	10	11	12	14	28	32	50	60	72	90	120	150	180	250	310	370	430	500	550	600
	Blankets, H. P.	12	15	20	24	30	34	38	42	45	80	100	160	200	240	300	400	500	600	800	1000	1200	1400	1600	1800	2000
	Bolsters, Hair, H. P. ...	4	5	6	8	9	10	11	12	14	28	32	50	60	72	90	120	150	180	250	310	370	430	500	550	600
	Cases, slip, for H. P. Hair Bolsters	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Cases, slip, for H. P. Pillo ws, large ...	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Cases, slip, for H. P. Pillows, small ...	2	2	4	4	6	6	8	8	10	20	25	40	50	60	70	90	110	140	175	220	270	310	350	400	450
	Cases, slip, for H. P. Hair Beds	4	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Cords, Bed. 19 yards for Regulation and Dropsy Bedsteads	5	6	7	8	9	11	12	13	16	32	40	60	75	90	110	150	190	225	300	375	450	525	600	675	750
	Cords for bed-pulls	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Handles for bed-pulls ...	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Pillows, Hair, large	4	5	6	8	9	10	11	12	14	28	32	50	60	72	90	120	150	180	250	310	370	430	500	550	600
	Pillows, Hair, small	1	1	2	2	3	3	4	4	5	10	12	20	25	30	35	50	60	75	100	125	150	175	200	225	250
	Sackings, Bed, for Regulation bedsteads ...	5	6	7	8	9	11	12	13	16	32	40	60	75	90	110	150	190	225	300	375	450	525	600	675	750
	" " for Dropsy bedsteads	...	...	...	...	...	...	...	...	1	2	3	4	6	7	8	11	12	16	28	32	38	45	50	58	65
	Sheets, linen	8	10	12	16	18	20	22	25	30	55	65	110	130	165	190	250	310	380	500	625	750	875	1000	1125	1250

Scale of Hospital Equipment.

C	Choppers, Meat	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	3	3	3	3	3
	Chisels, Ripping	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Corkscrews	1	1	1	1	1	1	1	1	2	3	3	4	5	6	8	10	12	15	20	25	30	35	40	45	50	
	Cocks, Brass, Bib, Driving, ½ inch Shifting Key	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	6	8	10	10	10	10	10	
	Colander, 1 gall. Tin... ...	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2	3	4	5	6	8	10	10	10	10	10	
	Combs, Hair	2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500	
	Combs, Small-tooth	1	1	1	2	2	2	2	3	3	5	6	10	12	15	20	25	30	40	50	65	80	90	100	110	120	
	Crocks, Milk	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	2	2	3	5	5	6	6	7	7	8	
	Cups, Spitting, Earthenware	2	3	4	6	7	8	9	10	12	25	30	50	60	75	90	120	150	180	250	300	375	440	500	550	600	
	Cleavers	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	2	3	3	3	3	3	3	3	
	Cups, Egg, Pewter	1	1	1	2	2	2	2	3	3	6	8	12	15	18	20	25	32	38	50	60	70	80	90	100	100	
D	Soap, Round, Earthenware...	1	1	1	1	1	2	2	2	3	5	6	10	12	15	18	25	30	38	50	62	75	88	100	112	125	
DISHES.	Meat, Tin, 18 in.	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2	3	4	5	6	8	9	10	12	14	15	
	Meat, Tin, 13½ in.	...	...	1	1	1	1	2	2	2	4	5	8	10	12	1	20	25	30	40	50	60	70	80	90	100	
	Meat, Baking, Tins, quart size, round shaped...	1	1	1	1	1	1	2	2	2	3	3	5	6	7	9	12	15	18	25	30	35	40	45	50	50	
	Dredgers, flour, tin	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	2	3	3	3	3	4	4	4	
F	Carving, large	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	4	4	5	5	5	6	6	
FORKS.	Carving, small	...	...	...	1	1	1	1	1	1	2	3	3	4	4	5	6	7	8	10	12	15	18	20	22	25	
	Dinner	5	6	7	9	10	12	13	14	16	28	33	56	65	80	96	126	160	190	250	310	375	440	500	560	625	
	Flesh, large	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	2	2	2	
	Flesh, small	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	
	Toasting	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	2	2	3	4	4	4	4	5	5	5	
FENDERS.	Soldiers', for Kitchens ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	
	Officers', for Wards	2	2	2	2	3	3	3	3	4	5	6	7	9	10	12	15	18	22	30	40	50	60	70	80	90	
MISCELLANEOUS.	Fire Engine	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	
	Filters, Water, Stoneware in Wicker	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	4	4	5	5	5	6	6	
	Funnels, Tin — Quart ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	2	2	3	3	
	Funnels, Tin — Pint...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	2	2	2	3	3	
	Funnels, Tin — 4-inch	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	3	3	
	Funnels, Tin — 1-inch	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	2	2	3	3	
	Forms, 4 feet	1	1	1	1	2	2	2	3	4	6	8	10	12	16	18	25	30	35	50	55	60	70	80	90	100	
	Feeders for sick men, Earthenware ...	1	1	1	1	1	1	1	1	2	3	4	6	7	8	9	12	15	18	25	30	35	45	45	50	50	

Scale of Hospital Equipment.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																								
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
G	Glasses, Looking	2	2	2	2	2	2	2	2	2	3	4	6	7	8	9	12	15	18	25	30	35	40	45	50	55
	Graters, Bread, Tin	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	3	4	4	5	5
H	Hammers, Claw, 20 oz. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	4	4	5	5	5	6	6
	Hooks, Meat, Gamble ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	3	4	6	6	6	6	8	9	10
	Hooks, Meat, Swivel... ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	3	4	6	6	6	6	8	9	10
	Hooks, S, 8½ inch	...	...	...	...	...	...	...	...	...	2	2	2	3	3	4	6	9	12	18	18	18	18	20	20	20
	Hooks, S, flat	1	1	1	1	1	1	1	1	2	2	2	3	3	3	3	3	4	5	5	6	7	8	9	10	10
I	Inhalers, Pewter	1	1	1	1	1	1	1	1	1	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
	Irons, Fire, sets, for Wards	2	2	2	2	2	3	3	3	4	5	6	8	9	10	12	15	18	22	30	40	50	60	70	80	90
	Irons, Fire, sets, for Kitchen	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Infusers, Tea, Tin, 8 quarts...	...	...	1	...	1	1	1	1	1	2	3	4	5	6	8	10	12	15	20	25	30	35	40	45	50
K	Fish Kettle	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Tea, Iron, 7 quarts	...	...	...	...	...	...	...	...	1	1	1	2	2	2	2	2	3	3	4	4	5	5	5	6	6
	Tea, Iron, 4 quarts	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3	4	4	5	5
KNIVES.	Carving, large	...	...	...	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	4	4	5	5	5	6	6
	Carving, small	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	6	7	8	10	12	15	18	20	22	25
	Dinner	5	6	7	9	10	12	13	14	16	28	33	56	65	80	96	126	160	190	250	310	375	440	500	560	625
	Bread	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Butchers', 10 inch	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
L	Ladles, 1 quart, Tin ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Ladles, 1 pint, Tin	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Lanterns, Talc	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	6	7	8	9	10	11	12
	Lamps, Hand, Agitable ...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	6	7	8	9	10	11	12
M	Glass Measure, Graduated, 4 oz.	1	1	1	1	1	1	1	1	2	3	3	5	6	7	9	12	15	18	25	30	35	40	45	50	50

Scale of Hospital Equipment.

MEASURES.	Wine, 1 pint, Pewter ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Wine. ½ pint do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Wine. gill. do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Wine, ½ gill. do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Porter, 1 gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Porter, ½ gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Porter, 1 quart do. ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Porter, 1 pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Porter, ½ pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 gall. or Dippers, Tin	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Milk, ½ gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 quart do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Milk, ½ pint do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 gill do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Milk, ½ gill do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Oil, 1 gall. Tin ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2
	Oil, ½ gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	2	2	2
	Oil, 1 quartdo. ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	2	2
	Oil, 1 pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Oil, ½ pint do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	2
MISCELLANEOUS.	Mugs for Medicine, Crockery, ¼ pints ...	2	3	4	5	6	7	8	9	10	22	26	45	55	70	80	105	130	155	210	265	315	365	420	480	530
	Mugs, Drinking, Crockery, 1 pint	5	6	7	8	10	12	14	16	18	30	38	55	68	80	100	130	160	190	250	310	375	440	500	560	625
	Mallets, large or Carpenters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	2	2
	Mallets, small...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Mat, Passage, Coir Fibre ...	2	2	2	2	2	2	2	2	2	3	3	3	3	3	4	5	6	7	10	12	14	16	18	20	20
	Mat, Door, Coir Fibre ...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	3	3	3	4	4	6	6	6
	Mugs, Pewter, 1 pint ...	1	2	2	3	3	4	4	5	5	10	12	20	25	30	38	50	60	75	100	125	150	175	200	225	250
	Meat Safes	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
N	Napkins, Ophthalmia ...	3	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	40	450	500
	Nets, Potato, large	...	...	...	...	...	...	...	...	...	2	3	5	6	7	9	12	15	18	24	30	35	40	45	50	55
	Nets, Potato, middling ...	...	...	...	...	...	1	1	1	1	2	2	3	4	5	6	8	10	12	16	20	25	30	35	40	45
	Nets, Potato, small	...	...	...	1	1	1	1	1	1	1	2	2	3	3	4	5	7	8	10	12	14	16	18	20	20
PANS. P	Close Stool, Fyfe's	1	1	1	1	1	2	2	2	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100
	Warming, Copper	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	3	4	4	5	5	5	6	6
	Bed, Earthenware	1	1	1	1	1	1	1	1	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100

Scale of Hospital Equipment.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																								
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
G	Glasses, Looking	2	2	2	2	2	2	2	2	2	3	4	6	7	8	9	12	15	18	25	30	35	40	45	50	55
	Graters, Bread, Tin	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	3	4	4	5	5
H	Hammers, Claw, 20 oz. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	4	4	5	5	5	6	6
	Hooks, Meat, Gamble ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	3	4	6	6	6	6	8	9	10
	Hooks, Meat, Swivel... ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2	3	4	6	6	6	6	8	9	10
	Hooks, S, 8 inch	...	...	...	...	...	...	...	...	...	2	2	2	3	3	4	6	9	12	18	18	18	18	20	20	20
	Hooks, S, flat	1	1	1	1	1	1	1	1	2	2	2	3	3	3	3	3	4	5	5	6	7	8	9	10	10
I	Inhalers, Pewter	1	1	1	1	1	1	1	1	1	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
	Irons, Fire, sets, for Wards	2	2	2	2	2	3	3	3	4	5	6	8	9	10	12	15	18	22	30	40	50	60	70	80	90
	Irons, Fire, sets, for Kitchen	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Infusers, Tea, Tin, 8 quarts...	...	...	1	...	1	1	1	1	1	2	3	4	5	6	8	10	12	15	20	25	30	35	40	45	50
K	Fish Kettle	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Tea, Iron, 7 quarts	...	...	...	...	...	...	...	...	1	1	1	2	2	2	2	2	3	3	4	4	5	5	5	6	6
	Tea, Iron, 4 quarts	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3	4	4	5	5
L KNIVES. KETTLES.	Carving, large	...	...	...	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	4	4	5	5	5	6	6
	Carving, small	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	6	7	8	10	12	15	18	20	22	25
	Dinner	5	6	7	9	10	12	13	14	16	28	33	56	65	80	96	126	160	190	250	310	375	440	500	560	625
	Bread	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Butchers', 10 inch	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
L	Ladles, 1 quart, Tin ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Ladles, 1 pint, Tin	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Lanterns, Talc	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	6	7	8	9	10	11	12
	Lamps, Hand, Agitable ...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	6	7	8	9	10	11	12
	Glass Measure, Graduated, 4 oz.	1	1	1	1	1	1	1	1	2	3	3	5	6	7	9	12	15	18	25	30	35	40	45	50	50

Scale of Hospital Equipment.

MEASURES.	Wine, 1 pint, Pewter ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Wine. ½ pint do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Wine. gill. do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Wine, ½ gill. do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Porter, 1 gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Porter, ½ gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Porter, 1 quart do. ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Porter, 1 pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Porter, ½ pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 gall. or Dippers, Tin	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Milk, ½ gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 quart do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Milk, ½ pint do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	3	3	4	4	5	5
	Milk, 1 gill do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	3	4	4	5	5
	Milk, ½ gill do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	3	4	4	5	5
	Oil, 1 gall. Tin ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2
	Oil, ½ gall. do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	2	2	2
	Oil, 1 quartdo. ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	2	2
	Oil, 1 pint do. ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Oil, ½ pint do. ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	2
MISCELLANEOUS.	Mugs for Medicine, Crockery, ¼ pints ...	2	3	4	5	6	7	8	9	10	22	26	45	55	70	80	105	130	155	210	265	315	365	420	480	530
	Mugs, Drinking, Crockery, 1 pint	5	6	7	8	10	12	14	16	18	30	38	55	68	80	100	130	160	190	250	310	375	440	500	560	625
	Mallets, large or Carpenters	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	2	2
	Mallets, small...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
	Mat, Passage, Coir Fibre ...	2	2	2	2	2	2	2	2	2	3	3	3	3	3	4	5	6	7	10	12	14	16	18	20	20
	Mat, Door, Coir Fibre ...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	3	3	3	4	4	6	6	6
	Mugs, Pewter, 1 pint ...	1	2	2	3	3	4	4	5	5	10	12	20	25	30	38	50	60	75	100	125	150	175	200	225	250
	Meat Safes	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
N	Napkins, Ophthalmia ...	3	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	40	450	500
	Nets, Potato, large	...	...	...	...	...	...	...	...	...	2	3	5	6	7	9	12	15	18	24	30	35	40	45	50	55
	Nets, Potato, middling ...	...	...	...	...	...	1	1	1	1	2	2	3	4	5	6	8	10	12	16	20	25	30	35	40	45
	Nets, Potato, small	...	...	...	1	1	1	1	1	1	1	2	2	3	3	4	5	7	8	10	12	14	16	18	20	20
P	Close Stool, Fyfe's	1	1	1	1	1	2	2	2	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100
	Warming, Copper	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	3	4	4	5	5	5	6	6
	Bed, Earthenware	1	1	1	1	1	1	1	1	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100

Scale of Hospital Equipment.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																								
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
POTS.	Chamber, with Cover, Earthenware... ...	1	1	1	1	1	1	1	1	1	2	3	5	6	7	9	12	15	18	25	30	35	40	45	50	55
	Do., without Covers, do., round rims... ...	4	5	6	8	9	11	12	13	14	26	32	50	62	75	90	120	150	180	250	310	375	440	500	560	625
	Coffee, small, Tin	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Mustard	1	1	1	1	1	1	2	2	3	4	4	5	5	6	8	10	13	15	20	25	30	35	40	45	50
	Tea, small, Earthenware ...	2	2	2	2	2	2	2	2	2	3	4	5	6	7	9	12	15	18	25	30	35	40	45	50	55
MISCELLANEOUS.	Pails, Water, Wood	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Pails, Slop, with Covers ...	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
	Pin, Rolling	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	2
	Plates, Crockery	5	6	8	10	12	14	16	18	20	40	50	80	100	120	150	200	250	300	400	500	600	700	800	900	1000
	Porringers, Blood, large Pewter	1	1	1	1	1	1	1	1	1	1	1	2	3	3	3	5	6	7	10	12	14	16	18	20	20
	Porringers, Blood, small do.	...	...	...	...	...	...	...	...	...	1	2	2	2	2	3	4	5	7	10	12	14	16	18	20	20
	Razors	1	1	1	1	1	1	1	1	1	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
	Rollers, for Round Towels ...	1	3	3	3	4	4	4	4	4	6	7	8	9	10	11	12	15	15	20	25	30	35	40	45	50
	Brackets, Iron, for do. pairs...	3	3	3	3	4	4	4	4	4	6	7	8	9	10	11	12	15	15	20	25	30	35	40	45	50
SAUCEPANS.	Iron, 2 galls. with lid ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
	Iron, 1 gall. do.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
	Iron, 1 quart, do.	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	21	25	30	35	40	45	50
	Iron, 1 pint, do.	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	3	3	3	3	4	5	6	7	8
	Bain Marie (Galvanized) Iron Dish... ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	2	2
	Nests for do. (sets)	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	2	2	2
	Stewpans, 2 quarts	...	...	...	...	...	...	...	...	...	1	1	1	2	2	2	2	2	3	3	4	4	4	4	5	5
	,, 1 gallon	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2	3	3	3	4	4	4	5
SPOONS.	Table, German Silver ...	5	6	7	9	10	12	13	14	16	28	33	56	65	80	96	126	160	190	250	310	375	440	500	560	625
	Tea, do. do.	5	6	7	9	10	12	13	14	16	28	33	56	65	80	96	126	160	190	250	310	375	440	500	560	625
	Mustard. Ivory	1	1	1	1	1	1	2	2	3	4	4	5	5	6	8	10	13	15	20	25	30	35	40	45	50
	Gravy, Iron tinned	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	4	5	6	6	6	6	8	8	8
	Medicine, Pewter	2	3	4	5	6	7	8	9	10	20	26	42	52	64	78	105	130	155	210	260	310	360	420	480	520

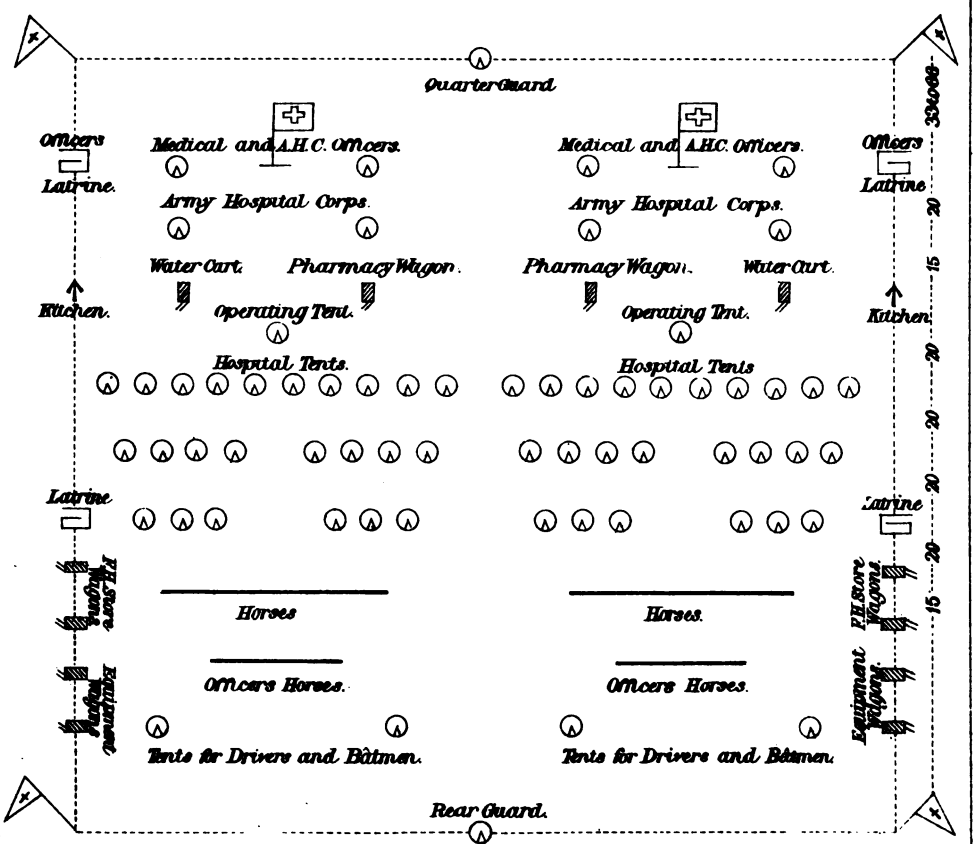
Scale of Hospital Equipment.

MISCELLANEOUS.																										
Salt Cellars, Wood ...	1	1	1	1	1	1	2	2	3	4	4	5	5	6	8	10	13	15	20	25	30	35	40	45	50
Saws, Meat, 14 inch ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	2	2	2	2	2	2
Saws, Butchers' 20 inch	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
Scissors, Hair cutting, 7 inch ...	1	1	1	1	1	1	1	1	1	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
Scuttle, Coal, Copper ...	1	1	1	1	1	1	2	2	3	4	4	5	7	8	10	15	18	22	30	38	45	52	60	65	70
Shapes, Pudding, quart ...	1	1	1	1	2	2	2	2	2	5	6	9	12	20	25	30	35	45	50	65	75	90	100	112	125
Shapes Pudding, pint ...	1	2	2	2	2	2	3	3	3	5	6	9	12	20	25	30	35	45	50	65	75	90	100	112	125
Shovels, Fire, Soldiers' ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3	4	4	5	5	5	5	5
Shovels, Dust, Tin ...	1	1	1	1	1	1	1	1	1	2	3	5	6	7	9	12	15	18	25	35	40	45	50	55	60
Shovels, Potato, Wooden ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	2	2	2	2	2	2
Shovels, large, common ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2
Screens, Bedside ...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2	3	4	4	5	6	6	7	8
Scoops, Hand, 2 quarts ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	4	2	3	3	4	4
Scoops, Hand, quart...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	2	2	3	3	4	4
Scoops, Hand, pint ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	2	2	2	2	3	3	4	4
Scoops, Hand, ½ pint ...	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	2	2	2	2	3	3	4	4
Skewers, Iron, with Chains...	...	...	...	1	1	1	1	1	2	2	3	5	6	7	9	12	15	18	25	30	35	40	40	40	40
Slate, large ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
Slice, Fish, Tin ...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
Snuffers ...	2	2	2	3	3	3	4	4	4	6	6	8	9	10	12	15	18	22	30	40	50	55	60	65	70
Sponges, Bath ...	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	4	5	6	8	10	12	14	16	18
Squeezers, Lemon ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3	4	4
Stand, Wash-hand, Surgery, Iron, portable	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
Steamer, large, Potato, for 2 gallon Saucepan...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	2	2	3	3
Steamer, Potato, small, for 1 gallon Saucepan...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3	4	5	5
Steel, Butchers' ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Strainer, Hair... ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
Strainer, Gravy, Wire ..	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2
Stools, Close, with Fyfe's pail and pan complete	1	1	1	1	1	2	2	2	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100
Strops, Razor... ...	1	1	1	1	1	1	1	1	2	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
Steels, common ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	3	3	4	5	5
TOWELS, TABLES.																									
Tables, Bedside, new pattern... ...	2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
Tables, with Drawers and Cupboards ...	1	1	1	1	1	1	1	1	1	2	3	4	5	6	8	10	13	15	20	25	30	35	40	45	50
Tables, large ...	...	...	...	...	...	...	1	1	1	1	1	1	2	2	2	3	4	5	7	8	10	12	14	16	18
Tables, small ...	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
Hand ...	5	7	10	12	15	18	20	23	25	50	62	96	125	156	187	250	312	375	500	625	750	875	1000	1125	1250
Round ...	6	9	12	15	18	20	24	27	30	60	75	112	150	180	225	300	375	450	600	750	900	1050	1200	1350	1500

Scale of Hospital Equipment.

	ARTICLES.	NUMBER OF PATIENTS' BEDS.																								
		2	3	4	5	6	7	8	9	10	20	25	40	50	60	75	100	125	150	200	250	300	350	400	450	500
TRAYS.	Wooden, dinner { Royal / Marine / Pattern } ...	1	1	1	1	1	1	1	1	1	2	2	4	5	6	7	10	12	15	20	25	30	35	40	45	50
	Bed, Wood, for Bedridden Patients	1	1	1	1	1	1	2	2	3	5	6	8	12	14	18	25	32	38	50	62	75	88	100	112	125
	Dressing, Surgical, Tin japanned	...	...	...	...	...	...	1	1	1	1	1	1	2	3	4	5	6	7	8	10	12	14	16	18	20
	Tin, dinner (Hot water) with 20 Diet Tins ...	...	...	...	...	...	...	...	...	1	2	2	2	3	3	4	5	7	8	10	13	15	18	20	23	25
	Tool Chests	...	...	...	...	...	...	...	...	...	...	...	...	...	...	..	1	1	1	1	1	1	1	1	1	1
	Tumblers, ½ pint	2	2	2	3	3	4	4	5	5	10	12	20	25	30	38	50	62	75	100	125	150	175	200	225	250
	Tongs, Steak	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	2	2	2	2	3	4	4
	Tubs, 18 galls.	...	...	...	...	...	...	...	...	1	1	1	1	2	2	2	2	3	4	6	6	7	8	10	11	12
	Tubs, 12 galls.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
	Tubs, 8 galls.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
	Tubs, 4 galls.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	2	3	3
U	Urinals, Crockery	1	1	1	1	2	2	2	2	2	4	5	8	10	12	15	20	25	30	40	50	60	70	80	90	100
W MACHINES, WEIGHING	For Flour, ¼ to 14 lbs. ...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3
	For Groceries, ¼ oz. to 7 lbs....	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3
	For Articles in Bulk, 7 lbs. to 500 lbs.	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	1	1	1	1	1	1
	For Meat, ¼ oz. to 14 lbs. with enamelled Slab or Pan	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	3	3
	Waistcoats, Strait	...	...	...	...	1	1	1	1	1	1	1	1	2	2	2	3	4	5	6	8	9	10	12	15	18
	Warmers, Foot, Pewter ...	...	...	...	...	...	...	...	...	...	...	...	1	1	1	2	3	4	5	5	6	7	9	10	11	12
	Warmers, Stomach, Pewter	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	3	4	5	5	6	7	9	10	11	12

PLAN OF ENCAMPMENT FOR A MOVEABLE FIELD HOSPITAL.



DANCERFIELD, LITH. 22, BEDFORD ST. COVENT.

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